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COVER LETTER

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION:	acco & B	eyond
DOCUMENT NUMBER:	130000	
The enclosed Articles of Amendment and fee are su		
Please return all correspondence concerning this ma	tter to the following:	
Eli Sal	Name of Contact Person	
Tobacco E	Name of Contact Person Beyond Firm/ Company	n
3701 N. Gre	en aue	PPT #1909
Tayor F1.	Address 33624	111 m.
Tobaccoand	Beyonde	lot mail. Lon
- (' C)	_	
Eli Sabha Name of Contact Person	at (8/3	de & Daytime Telephone Number
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	urtment of State:
\$35 Filing Fee \$\text{Certificate of Status}\$	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle
rananassee, FL 32314	2001 E	ACCURATE CORROL CITCAL

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

LOCA CONTRACTOR

Tobacco & Beyond	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P /3000097333	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amount its Articles of Incorporation:	endn

Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P	"company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	
Name of New Registered Agent E/r Sabh (Florida street New Registered Office Address: 370/ N. Green (City) -	address)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:	c, unu bun	iy omin, c	or as an man.			
X Change	<u>PT</u>	John Do	<u>e</u>			
X Remove	<u>V</u>	Mike Jo	nes			
X Add	<u>sv</u>	Sally Sm				
Type of Action (Check One)	Title		Name		<u>Addres</u> s	APT#
1) Change	Pt	- ,	Jacqueline	Sobha	370/ N. Cyreen,	ave Toupar
Add Remove	PA	edd			Address 370/ N. Green, Eli Sabba Jacqueline S	abha
2) Change		_				
Add						
Remove 3) Change						
Add		.		, 		
Remove						
4) Change		- .				
Add						···
Remove						<u> </u>
5) Change		-				_
Add Remove						
6) Change Add		_				_
Remove						

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
Remove Jacqueline Subha Tor	taly
Hemove Joushue Line Sobba Tor ADD Eli Sabha AS Presioleu	£.
. If an amendment provides for an exchange, reclassification, or cancellation of issued provisions for implementing the amendment if not contained in the amendment itsel (if not applicable, indicate N/A)	
(g not appricable, mancare 1971)	

The date of each amendment(s) adoption:	, if other than th
•	
Effective date if applicable: $\mathcal{H} \cdot \mathcal{S} \cdot \mathcal{H} \cdot \mathcal{P}$. (no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated_ 10 - 13 - 14	
Dated 10-13.14 Signature E11 Sabha	_
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	<u> </u>
(Typed or printed name of person signing)	
(Title of person signing)	-