P16000007691

(Re	questor's Name)			
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SECRETARY OF STATE
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AUG \$ \$ 2016 C LEWIS



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 15, 2016

ABDELMONEM ELSAKHAWY 2155 WEST COLONIAL DRIVE UNITS 110-111 ORLANDO, FL 32804 US

SUBJECT: SKY SMOKE, INC. Ref. Number: P16000007691

We have received your document for SKY SMOKE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 016A00017226

Carolyn Lewis Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:		SKY SMOKE, INC.		
DOCUMENT NUMBER:	P16000007691			
The enclosed Articles of Amenda	ment and fee are s	ubmitted for filing.		
Please return all correspondence	concerning this ma	atter to the following:		
	А	BDELMONEM ELSAKHA	AWY	
	Name of Contact Person			
Firm/ Company				
2155 WEST COLONIAL DRIVE UNITS 110 & 111				
Address				
		ORLANDO, FL 32804		
 		City/ State and Zip Coo	de	
	s	KYSMOKEINC@GMAIL	COM	
	E-mail address:	(to be used for future annua	al report notification)	
For further information concerning	ng this matter, plea	se call:		
ABDELMONEM ELSAKHAWY 407 690-8706		690-8706		
Name of Contact	Person	Area Co	ode & Daytime Telephone Number	
Enclosed is a check for the follow	ving amount made	payable to the Florida Dep.	artment of State:	
	75 Filing Fee & ifficate 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 Addre Amendment Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATION.

SKU Smoke,	InC.	2016 AUG 22	AM 85 UU
(Name of Corporation as currently filed with the F	lorida Dept. of State)		
P16000007691			
(Document Number of Corporation (i	fknown) Pral: +		
Pursuant to the provisions of section 607.1006, Florida Statutes, this Incorporation:	corporation adopts the follow	ving amendment(s) to its Articles of
A. If amending name, enter the new name of the corporation:			
			The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	Co". A professional corpora		
B. Enter new principal office address, if applicable:	2155 WEST COLONIAL	DRIVE	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	UNITS 110 & 111	•	
•	Drlando FL.	32804	
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 addinew registered agent and/or the new registered office address		e of the	
Name of New Registered Agent			
	<u>.</u>		
(Florida si	reet address)		
New Registered Office Address:	, Florida_		
(City))	(Zip Code)	·
New Registered Agent's Signature, if changing Registered Agent. I hereby accept the appointment as registered agent. I am familiar to	<u>:</u> with and accept the obligations	of the position.	
Signature of New Registered A	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: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	KARIM ABBAS	2337 LAKE DEBRA DR
Add			APT 518
X Remove			ORLANDO, FL 32835
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5)Change			
Add			
Remove			
6) Change			
Add			
Remove			

·
<u>es,</u>

	07/01/2016		
The date of each amendard date this document was sign	nent(s) adoption:	FILE SECRETARY DIVISION OF CO	if other than the OF STAIL
Effective date <u>if applicab</u>		DIVISION OF CO	RPORALUM
	(no more than 90 days after amendment file date)	2016 AUG 22	AM 8: 00
Adoption of Amendment	(s) (<u>CHECK ONE</u>)		
☐ The amendment(s) was/ by the shareholders wa	were adopted by the shareholders. The number of votes cast for the amen s/were sufficient for approval.	dment(s)	
	were approved by the shareholders through voting groups. The following vided for each voting group entitled to vote separately on the amendment		
"The number of v	otes cast for the amendment(s) was/were sufficient for approval		
by	,,,		
•	(voting group)		
action was not required.	were adopted by the incorporators without shareholder action and shareho		
	08/01/2016		
Dated			
Signatur	e Charles	·	
	(By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or oth appointed fiduciary by that fiduciary)		
	ABDELMONEM ELSAKHAWY		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		