Nov. 29. 2017: 3:53FMbns	No. 0741 Pap. 10f2
Florida/Department of Division of Corporation Electronic Filing Cover Si	
Note: Please print this page and use it as a cover number (shown below) on the top and bottom of a	21
(((H17000312929 3)))	
H170003129293ABC1	on your browser from this
page. Doing so will generate another	
Tc: Division of Corporations Fax Number ; (850)617-6	390 .
From: Account Name : SANDRA ROLO Account Number : I1998000000 Fhone : (954)437-07 Fax Number : (954)436-85	69 700
**Enter the email address for this business ent annual report mailings. Enter only one ema	
Email Address:	
Certificate of Status Certified Copy Page Count Estimated Charge	0 0 01 \$35.00 20 20 20 20 20 20 20 20 20 20 20 20 2
Electronic Filing Menu Corporate Filing Menu	Help
https://efile.sunbiz.org/scripts/efilcovr.exe	NOV 3 0 2017 11/29/2017

T. LEPAKEUX

Nov. 29. 2017 3:54PM

• •

H17000312929 3

No. 0741 P. 2

I

зĻ.

수 약 <u>3</u>2

Articles of Amendment

to . Articles of Incorporation

of

UVAPE N SMOKE, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P17000088528

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

name must be distinguishable and contain the word "corpora "Corp" "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional association." or the abbreviation	or "Co". A professional corpo	The new porated" or the abbreviation ration name must contain the	
B. Enter new principal office address, if applicable:	2668 N. UNIVERSITY I	2668 N. UNIVERSITY DRIVE	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	SUNRISE, FL 33322	- ·· ·· ·· ··	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	2668 N. UNIVERSITY I	DRIVE	
	SUNRISE, FL 33322		
D. <u>If amending the registered agent and/or registered office a</u> <u>new registered agent and/or the new registered office addr</u> <u>Name of New Registered Agent</u>	<u>ddress in Florida, enter the na</u> <u>c831</u>	me of the	
(Florida	street address)		
<u>New Registered Office Address</u> :	(City)	_, Florida (Zip Code)	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia		ns of the position.	
Signature of New	v Registered Agent, if changing		
H17000312929	3	FIL TINDV 2s	
Page	1 of 4		

Nov. 29. 2017 3:54PM

-

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 = ChiefExecutive 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 Janes is listed as the V. There is a change, Mike Janes leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Janes, V as Remove, and Sally Smith, SV as an Add. **Example:**

X Change <u>PT</u> John Doe X Remove Y Mike Jones <u>X</u> Add <u>sv</u> Sally Smith Type of Action Tille Address Name (Check One) VP GLEN J. LANIER 2331 S. UNIVERISITY DRIVE 1) ____ Change DAVIE, FL 33324 ____ Add Х Remove VP CARLO BARRIOS 2668 N. UNIVERISITY DRIVE 2) ____ Change х SUNRISE, FL 33322 Add Remove 3) ____ Change Add Remove 4) ____ Change _ Add __ Remove 5) ____ Change _____ ____ Add б) ____ Сћалде ____ Add Remove Page 2 of 4

H17000312929 3

Nov. 29. 2017 3:54PM

•

H17000312929 3

Attach additional sheets, if necessary).	(Be specific)
·····	
	· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·	
	·
provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself;
(if not applicable, indicate N/A)	

Page 3 of 4

· · ·

Nev. 29. 2017 3:54PM

No. 0741 P. 5

.....

.

ì

.....

i

H17000312929 3

The date of each amendment(s) adoption:	11-30-17	, if other than the
date this document was signed.		
Effective date if applicable;	11-30-17	
	(no more than 90 days after amendment f	îte date)
Note: If the date inserted in this block does n document's effective date on the Department of	ot meet the applicable statutory filing requ State's records.	irements, this date will not be listed as the
Adoption of Amendment(1) (CH	ECK ONE)	
The amendment(s) was/were adopted by the s by the shareholders was/were sufficient for a		the amendment(s)
The amendment(s) was/were approved by the must be separately provided for each woring	shareholders through voting groups. The j group entitled to vote separately on the ans	ollowing statement endment(s):
"The number of votes cast for the amen	dment(s) was/were sufficient for approval	
by		
(vali	ing group)	
The amendments, was/were adopted by the t	poard of directors without shareholder, actio	n and shareholder
action was not required.		
The amendment(s) was/were adopted by the f		
action was not required	ncorporators without shareholder action and	i shareholder
	1 AR-17	
Dated	11-24-17	
Signature		
	tert or other officer - if directors or officers porator - if in the hands of a receiver, truste	
appointed fiduciary i	by that fiduciary)	
JOSE BARR	205	
L		
() ()	Typed or printed name of person signing)	
IRESIDENT	Г	
	(Title of person signing)	

Page 4 of 4

H17000312929 3