P17000198246

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TO DEC 21 AN 9:21

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: EL Grandba Cicars INC.
NAME OF CORPORATION: EL Grand Cigars inc. DOCUMENT NUMBER: P17000096246
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Carlos Rodriguez. Name of Contact Person
6361 SW 20 St 1
636 SW 20 St 1 Address Minni FC 33155 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Carlos Rodriguez at (786) 370 1989 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

EL Grandba (igars INC
	as cuprently filed with the Florida Dept. of State)
P170000 98246	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida States Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	oration:
,	The new
	corporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the reviation "P.A."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRE</u> .	SS) <u>590 Dodecanesu b</u> lyd Torpun Springs FL 34689
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.D. Box 161501 Hiplanh, Fl 33016.
D. If amending the registered agent and/or registered onew registered agent and/or the new registered officers.	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	Florida
	(City) (ZigCode) C 122
New Registered Agent's Signature, if changing Registe	
I hereby accept the appointment as registered agent. I an	m familiar with and accept the obligations of the position
Signatur	re 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.

X Change	PT John Doe	}	
X Remove	V Mike Jon	ocs.	
<u>X</u> Add	SV Sally Smi	<u>ith</u>	
Type of Action (Check One)		<u>Name</u>	Address
1) 🔀 Change	VP	Erwasto Cruz	715 E LIME ST
Add			Apt III Tarpon Springs
Remove			FL 34689.
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	+		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			-
Add			
Remove			

y	icles, enter change(s) (Be specific)			
				
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provisions for implementing the am	hange, reclassification	on, or cancellation ined in the amendi	of issued shares, nent itself:	
f an amendment provides for an exe provisions for implementing the am (if not applicable, indicate N/A)	hange, reclassification endment if not conta	on, or cancellation ined in the amendi	of issued shares, nent itself:	
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provisions for implementing the am	hange, reclassification	on, or cancellation ined in the amendi	of issued shares, nent itself:	

The date of each amendment(s) adoption:date this document was signed.	Dacambar 21", 20	, if other than th
Effective date if applicable:		
	(no more than 90 days after amendment file o	date)
Note: If the date inserted in this block does document's effective date on the Department o	not meet the applicable statutory filing requirer f State's records.	ments, this date will not be listed as th
Adoption of Amendment(s) (CI	IECK ONE)	
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes east for the approval.	amendment(s)
	ne shareholders through voting groups. The follog g group entitled to vote separately on the amend	
"The number of votes cast for the anic	endment(s) was/were sufficient for approval	
by	ting group)	
The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action a	and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and si	hareholder
Dated 12/2/// Signature) 26	
(By a di rector, pre selected, by an inc	sident or other officer – if directors or officers horporator – if in the hands of a receiver, trustee y by that fiduciary)	
_Ce	Typed or printed name of person signing)	<u>;</u>
	Prasident.	
	(Title of person signing)	