## 91800006853

(Requestor's Name)	
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
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(Document Number)	
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R. WHITE NOV 0 7 2018



## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: HOLLYWOOD TO	DBACCO ITSA INC			
DOCUMENT NUMBE	R: P18000069853				
	Amendment and fee are su	hmitted for filing.			
Please return all correspo	ondence concerning this ma	tter to the following:			
Н	AIKEL SEDOUKI				
_		Name of Contact Person	1		
_		Firm/ Company	<u> </u>		
20	002 HOLLYWOOD BLVE	)			
	Address				
Н	OLLYWOOD, FL. 33020				
		City/ State and Zip Code			
HAIKE	LSEDOUKI@HOTMAIL.C	COM			
	E-mail address: (to be us	ed for future annual report	notification)		
For further information of	oncerning this matter, pleas	e call:			
HAIKEL SEDOUKI		786 at (	246-7607		
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for t	he following amount made p	payable to the Florida Depa	irtiment of State:		
☐ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ameno Divisio P.O. B	Ig Address Iment Section on of Corporations ox 6327 assec, FL 32314	Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation σf

## FILED

2018 OCT 31 PM 1:13

s) to

HOLLYWOOD TOBACCO ITSA INC

HOFFA MOOD TORVECO LEZY INC	CC Darrey
(Name of Corporation P18000069853	as currently filed with the Florida Debt of Statevi STATE
(Docume)	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corp	poration:
HOLLYWOOD TOBACCO INC	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the bbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	<u>PESS</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 new registered agent und/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	Florida(City) (Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. It	tered Agent: am familiar with and accept the obligations of the position.
Signat	ure 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: 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			
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			-
Remove			
5) Change		<u> </u>	
Add			
Remove			
0 0			
6) Change		<del></del>	
Add			<del></del>
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	<del></del>
	<del></del>
	, <u>, , , , , , , , , , , , , , , , , , </u>
<u>If an amendment provides for an exch</u>	hange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
<del>- · · · · · · · · · · · · · · · · · · ·</del>	

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.	11/201/	
08/ Effective date <u>if applicable</u> :	14/2018	
<del></del>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	; will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	et.
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
<del>-,</del>	(voting group)	
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
10/25/201	8	
DatedSignature	15. Klsel	
(B <del>y a -</del> selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	
	HAIKEL SEDOUKI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del></del>

- . . .