P1900000 4073

| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

TO: Amendment Section Division of Corporations

.

| NAME OF CORPO | DRATION: FLOW HOOKAH | LOUNGE INC | | | |
|------------------------------------------------------------|------------------------------------------------|-----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|--|--|
| | 1BER: P19000004073 | | | | |
| The enclosed Article | rs of Amendment and fee are su | | | | |
| Please return all corr | respondence concerning this ma | itter to the following: | | | |
| | JOSE M CUSTODIO | | | | |
| | | Name of Contact Person | | | |
| | FLOW HOOKAH LOUNGE INC | | | | |
| | Firm Company | | | | |
| | 2312 W WATERS AVE STE 4 | | | | |
| | Address | | | | |
| | TAMPA, FL 33604 | | | | |
| | | City/ State and Zip Cod | _ | | |
| | (II (M) (II (II) (II) (II) (II) (III) | | | | |
| | CLOVC135@YAHOO.COM | | | | |
| | E-mail address; (to be u | sed for future annual report | notification | | |
| For further informat | ion concerning this matter, plea | se eall: | | | |
| | | | | | |
| JOSE M CUSTODIO | | at (813 | 606-1075 | | |
| Name of Contact Person | | at (813) 606-1075 Area Code & Daytime Telephone Number | | | |
| Enclosed is a check | for the following amount made | | | | |
| ■ \$35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | El\$52,50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | |
| Mailing Address Amendment Section Division of Corporations | | Street Address Amendment Section Division of Corporations | | | |
| P.O. Box 6327 | | The Centre of Tallahassee | | | |

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

| FLOW E | IOOKAH | LOUNGE | INC |
|--------|--------|--------|-----|
| | | | |

| FLOW HOOKAII LOUNGE INC | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|------------------------------------------------------|
| (Name of Corporation as current | ly filed with the Florida Dept. of State | gi |
| P19000004073 | | |
| (Document Number of | of Corporation (if known) | · · · · · · · · · · · · · · · · · · · |
| Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation: | Florida Profit Corporation adopts the | following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | | |
| 813 CAFE INC | , | 200 |
| name must be distinguishable and contain the word "corporation." "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". "chartered." "professional association." or the abbreviation "P.A. | A professional corporation name mus | The new breviation "Corp.," 1 contain the word |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | | · · · · · · · · · · · · · · · · · · · |
| | | 2021 |
| 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 add new registered agent and/or the new registered office address | ress in Florida, enter the name of the | |
| Name of New Registered Agent | | · |
| | | * = ···· |
| th lorida sh | cet address1 | |
| New Registered Office Address: | , Flerida | Zip Coder |
| New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v | <u>:</u> with and accept the obligations of the pr | estiton |
| | | |
| Signature of New R | egistered Agent, if changing | |
| Check if applicable | | |

Check if applicable \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

6) ____ Change

Add

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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith. SV as an Add.

Example: X Change PΤ John Doe X Remove \overline{Y} Mike Jones X Add \underline{SV} Sally Smith Type of Action Title Name | Address (Check One) 1) ____ Change ____ Add ____ Remove 2) ____ Change Add Remove 3.) ____ Change ____ Add ____ Remove 4) ____ Change ____ Add ____ Remove 51 ____ Change ____ Add Remove

| | dditional sheets, if necessary). | icles, enter change(s) l (Be specific) | - | | |
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| | 08/27/2021 | |
|-----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|
| The date of each amendment(s) | idoption: | , if other than the |
| date this document was signed. | | |
| 08/ | 27/2021 | |
| Effective date <u>if applicable</u> : | tno more than 90 days after amendment file de | ale) |
| Note: If the date inserted in this document's effective date on the I | block does not meet the applicable statutory filing requiren- | |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were action was not required. | opted by the incorporators, or board of directors without share | reholder action and shareholder |
| ☐ The amendment(s) was/were ac by the shareholders was/were: | opted by the shareholders. The number of votes east for the ufficient for approval. | amendment(s) |
| | proved by the shareholders through voting groups. <i>The followed woting group entitled to vote separately on the amenda</i> | |
| "The number of votes cas | t for the amendment(s) was/were sufficient for approval | |
| by | " | |
| · · · · · · · · · · · · · · · · · · · | (voting group) | |
| 08/27/202 Dated | n Cellin | ···································· |
| \ /select | firector, president or other officer—if directors or officers ha ed, by an incorporator—if in the hands of a receiver, trustee, ited fiduciary by that fiduciary) | we not been or other court |
| | JOSE M CUSTODIO | |
| | (Typed or printed name of person signing) | |
| | AMBR | |
| | (Title of person signing) | |