P21000035340

	(Requestor's Name)				
	(Address)				
	(A.I.I.				
	(Address)				
	(City/State/Zip/Phone #)				
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:A	nsterdam Smoke Shop Inc
DOCUMENT NUMBER: P21	000035340
The enclosed Articles of Amendment and fee are	
Please return all correspondence concerning this	matter to the following:
	Name of Contact Person
	Firm/ Company 151 University Blud S Address
	Jacksonville, FL 32216 City/ State and Zip Code
E-mail address: (to b	e used for future annual report notification)
For further information concerning this matter, p	lease call:
Brett Tsaul	at (901) 742 - 23 % Y Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	ide payable to the Florida Department of State.
\$35 Filing Fee	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of			
	/ //		
Amsterdami	SM OKC	<u> >40P</u> ,	I Y(
(Name of Corporation as currently filed	with the Florida E	ept. of State)	

P2/00 00	035340	
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006 , Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following	amendment(
A. If amending name, enter the new name of the corporation:		777
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation	The new "Corp.," the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		
D. Hamending the registered agent and/or registered office address:		
Name of New Registered Agent		
(Florida str	e: uddress)	
New Registered Office Address:	City) , Florida (Zip Ce	
	City) (Zip Co	ule)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am jamiliar se	ith and accept the obligations of the position.	
Signature of New Re	gistered Agent, if changing	

Check if applicable

☐ 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)

Example:

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	<u>PT</u>	<u> John Doe</u>	
X Remove	$\overline{\lambda}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	2	Milad Wardy	8834 Nature view LAM
Add			Jacksonville FL 3221
Remove 2) Change Add	P	Sam Ajjan	Jacksonville, Fl 32257
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			-
Add			
Remove			

		(Be specific)			
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The date of each amendment(s) adopti	inn:	6/1	702		, if other than the
date this document was signed.			<i>;</i>		
Effective date <u>if applicable</u> :		6/1	3051		
	Ino mor	re than 90 da	iys after amendn	ient file date)	
Note: If the date inserted in this block document's effective date on the Departs	does not meet the ment of State's re	he applicabi ecords.	e statutory tilmg	g requirements, this	s date will not be listed as the
Adoption of Amendment(s)	(CHECK OF	<u>NE</u>)			
The amendment(s) was/were adopted action was not required.	by the incorpora	ators, or boar	rd of directors w	nthout shareholder	action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffici			unber of votes c	ast for the amendm	eni(s)
☐ The amendment(s) was/were approve must be separately provided for each	ed by the shareho h voting group er	olders throug utitled to vote	h voting groups. e separately on t	The following sta he amendmentis)	tement
"The number of votes cast for t	he amendment(s) was/were s	aufficient for app	irova!	
do	(voting group	p)	<u>. </u>	· "	
Dated6	11/202)			
selected, by	z an incorporator	– if in the h		officers have not be	
appointed i	iduciary by that Sa (Typed o		ne deperson sign	uing)	
		Pr Siden person signi	<u>+</u>		