P9900000367

((Requestor's Name)
	(Address)
,	(Addiess)
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	(City/State/Zip/Phone #)
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PICK-UP	WAIT MAIL
((Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
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* COVER LETTER

TO: Amendment Section

Division of Corporations

			•
NAME OF CORPOR	ATION: Coolom Va	pors Inc	
	ER: P9900066	_	
	of Amendment and fee are sub		
Please return all corres	pondence concerning this mat	ter to the following:	
-	Joshua Robert 1	Stor Name of Contact Person	
	Custam smoke	Inc. OBA: (usto.) Firm/ Company	n vapors inc
	1005 W US High	wwy 72 Ste /	n vapors inc A Soffner, FL, 33584
	Seffuer FL		
		City/ State and Zip Code	e
For further information	E-mail address: (to be us		notification)
Joshua	Custor of Contact Person	at (35Z	de & Daytime Telephone Number
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Dep	artment of State:
□ \$35 Filing Fee	S43.75 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)
Amo Divi	ling Address endment Section sion of Corporations Box 6327	Ameno Divisio	Address Iment Section on of Corporations Centre of Tallahassee
	ahassee, FL 32314	2415 1	N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment

to Articles of Incorporation

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C	istom Vapor	-s Inc	2022 OCT 12 1	³ N 3: 50
(Name of Co	rporation as currently	filed with the Florida	Dept. of State)	
	ustom Vapor orporation as currently P9960006	6367	ALL MIASTER.	·
	(Document Number of C			,
ursuant to the provisions of section 607.1006 s Articles of Incorporation:	6, Florida Statutes, this <i>Fl</i>	orida Profit Corporat	ion adopts the followin	g amendment(s) to
If amending name, enter the new name	of the corporation:			
				_The new
ame must be distinguishable and contain the Inc.," or Co.," or the designation "Corp, chartered." "professional association," or t	" "Inc," or "Co". A	mpany," or "incorpora professional corporat	ated" or the abbreviation name must contain	on "Corp.," n the word
B. Enter new principal office address, if ap Principal office address MUST BE A STRE	pplicable:	1005 W U	5 Huy 92 FL 3358	Ste A 34
· D. A	lo.			
Enter new mailing address, if applicab (Mailing address MAY BE A POST OFF		Seffner, F	Highway 97 L 33584	<u>Ste</u> A
D. If amending the registered agent and/onew registered agent and/or the new re		ess in Florida, enter t	he name of the	
Name of New Registered Agent	Joshua R	Castor	···	_
Name of New Registered Agent	005 W US Hied	nway 97 i	ste A	
	C-00	· · · · · · · · · · · · · · · · · · ·	73	584
New Registered Office Address:	23 LLVEI	City)	Florida 33 (Zip	Code)
	(City)	(Zip	Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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)

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

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>	Name	<u>Addres</u> s
1) Change		Bradford K Ahrens	515 Clemons Road
Add Remove	0		Brandon, FL 33510
2) Change Add	<u></u>	Joshua R (ustor	1005 W US Highway 97 Ste A Seffner FL 33584
Remove Change			
Add Remove 4) Change			
Add			
5) Change			
Add Remove			
6) Change Add			
Remove			

	ssary). (Be specific)			
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			et a.l	
f an amendment provides for	an avchange reclassif	ication or cancellation	n of icclied charec	
f an amendment provides for provisions for implementing	an exchange, reclassit	ication, or cancellation contained in the amen	dment itself:	
provisions for implementing t	the amendment if not-	fication, or cancellation contained in the amen	dment itself:	
f an amendment provides for provisions for implementing (if not applicable, indicate	the amendment if not-	fication, or cancellation contained in the a <u>men</u>	dment itself:	
provisions for implementing t	the amendment if not-	fication, or cancellation contained in the amen	dment itself:	
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f an amendment provides for provisions for implementing (if not applicable, indicate	the amendment if not-	ication, or cancellation contained in the amen	dment itself:	
provisions for implementing t	the amendment if not-	ication, or cancellation contained in the amen	dment itself:	

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no m	ore than 90 days after amendment file date)
Note: If the date inserted in this block does not meet document's effective date on the Department of State's	the applicable statutory filing requirements, this date will not be listed as trecords.
Adoption of Amendment(s) (CHECK (<u>DNE</u>)
The amendment(s) was/were adopted by the incorporaction was not required.	orators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for approve	olders. The number of votes cast for the amendment(s) al.
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group	holders through voting groups. The following statement entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment	(s) was/were sufficient for approval
by	
(voting gro	up)
Dated 10/11/2028	
Signature 1	r other officer – if directors or officers have not been
selected, by an incorporat	or – if in the hands of a receiver, trustee, or other court
appointed fiduciary by the	it fiduciary)
Josh	or printed name of person signing)
(Typed	or printed name of person signing)
CFO	
(Title o	of person signing)