## 628917

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
0.45.40.40.4
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800304243548

10/11/17--01024--011 \*\*52.50

2017 OCT 1.1 AM 5: 54

OCT 10. 2011

## **COVER LETTER**

TO: Amendment Section

Division of Corporations

AND OCT 11 AND SO

NAME OF CORPORATION: Beach combet Liquois, Inc.					
DOCUMENT NUMBER: 62617					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Terry A. Unger Or. Name of Contact Person					
Beachcombes Liguors Inc.					
1600 5 McCall Rd.  Englewood FL 34223					
City/ State and Zip Code  E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Terry A. Unger Dr. at (407) 401 6606  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:					
□ \$35 Filing Fee  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 BuildingFallahassee, FL 323142661 Executive Center Circle					

Tallahassee, FL 32301

. Articles o	f Amendment
	to
Articles of	Incorporation 9
<u> </u>	of 1
Beachromh	er Lighuors, INC.
(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
/	67 × 9 17
(Document Numbe	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional association," or the abbreviatio	r "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1600 South McCall Rd.
(Frincipal Office address <u>MOST BE A STREET APPORESS</u> )	Englewood FL 34223
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1600 South McCall Rd.
	Englewood FL 34223
D. If amending the registered agent and/or registered office as new registered agent and/or the new registered office addr	
Name of New Registered Agent 1671 A.	McCall Rd
New Registered Office Address: Track Woo	street address)
New Negisiered Office Address.	(City) (Lip Code)
New Registered Agent's Signature, if changing Registered Age	ent:
I hereby accept the appointment as registered agont. Jam familia	or with and accept the obligations of the position.
Signature of box	Registered Agent, if changing
Signature of bee	r registerea Agent, ij 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 Doc	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)  1) Change Add	S Done M. Unger	Address 8475 Manasota Key Rd
Remove  2) Change Add	PD Terry A. Unger Ur.	Englewood FL 34023 8475 Manasota Key Rd.
Remove  3 ) Change Add Remove		Englewood H. 3422
4) Change Add Remove		
5) Change Add Remove		
6) Change Add Remove		

If amending or adding a Attach additional sheets,	additional Articles if necessary). (F	, enter change(s) Be specific)	here:		
				<u>-</u>	
				<u></u>	<del></del>
					······································
				<del></del>	
<del></del>	· · · · · · · · · · · · · · · · · · ·	··- ··			
· · · · · · · · · · · · · · · · · · ·					
				<u>-</u>	
			•		
				•	
f an amendment provided provisions for implementations for implementations.	nting the amendm	e, reciassification lent if not contain	n, or cancellation ned in the amend	of issued shares. ment itself:	
(if not applicable, ii	idicate N/A:				
* ************************************	<del></del>		<del></del>		· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·				<del></del>
					· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :  (no more than 90 days after amendment file date	
tno more than 90 days after amendment file date	·)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the am by the shareholders was/were sufficient for approval.	nendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment.	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and action was not required.	shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and share action was not required.	eholder
Dated 1016 2017	
Signature When When When Signature (By a director, president or other officer – if directors or officers have selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
President Director	
(Title of person signing)	