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## COR AMND/RESTATE/CORRECT OR O/D RESIGN TWO SPIRITS, INC.

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TO: Amendment Section

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Page: 3

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## **COVER LETTER**

Division of Corp	porations		
NAME OF CORPO	RATION: Two Spirits, Inc.		
DOCUMENT NUM	100000000000000		
		haring of Car Cilian	
The enclosed Articles	of Amendment and fee are su	omined for fitting.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Kendal A. Schoepfer		
		Name of Contact Person	1
	RezLegal, LLC		
		Firm/ Company	
	816 A1A North, Suite 204		<del> </del>
		Address	
	Ponte Vedra Beach, Florida 3		
		City/ State and Zip Code	
	kmalin@comcast.net		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
J. David Jeans, Esq.		at (	567-1172
Name	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	ertment of State:
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	iling Address		Address
	endment Section rision of Corporations		ment Section n of Corporations
	D. Box 6327	The Co	entre of Tallahassee
ТаІ	lahassee, FL 32314		N. Monroe Street, Suite 810 ssee, FL 32303

LITEORNE COOK

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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## Articles of Amendment Articles of Incorporation of

Page: 4

Two Spirits, Inc.		
(Name of Corporation as curr	ently filed with the Fl	orida Dept. of State)
P03000090489		
(Document Numb	er of Corporation (if k	nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, tits Articles of Incorporation:	this <i>Florida Profit Cor</i>	poration adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>ı:</u>	
Two Spirits Holdings, Inc.		The new
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 professional cor	orporated" or the abbreviation "Corp"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
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 and new registered agent and/or the new registered office add  Name of New Registered Agent	ress:	ter the name of the
(Florid	la street address)	
New Registered Office Address:		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famili  Signature of Ne	gent: liar with and accept the ew Registered Agent, if	
· · ·	G	
Check if applicable		

Example:

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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	<u>PT</u>	<u>John Do</u>	<u>e</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	nes	
X Add	<u>\$V</u>	Sally Sn	<u>sith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		4.4
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		<del></del>		
Add				
Remove				
4) Change		<del></del>		
Add				
Remove				
5) Change	<del></del>	_		
Add				
Remove				
6) Change		_		
Add				
Remove				

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Attach additional sheets, if necessary).	(Be specific)	
		-
	4 ************************************	
<u></u>		
	<u> </u>	
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f an amendment provides for an exc	change, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	enument is not contained in the amendment used.	
* ****		
		· · · · ·

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The date of each amendment(s) adoption: \_\_\_\_\_\_, if other than the date this document was signed. Effective date if applicable: \_ (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. ■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval by \_\_\_\_\_\_\_\_(voting group) Dated 5/18/2021 Docusigned by: Signature Edward A. Malin (By a director, president or other officer – if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Edward A. Malin (Typed or printed name of person signing) President (Title of person signing)

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