P070000 19701

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

Office Use Only



900335086329

10/11/19--01013--017 **52.50

F | 1 | 1 | 5: 29

OCT 29 2018
T. LENSEUX

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: RYR BE	NERAGE:		
DOCUMENT NUMBER: PO700019			
The enclosed Articles of Amendment and fee are subj			
Please return all correspondence concerning this matte	er to the following:		
LODAVA	2010		
LOPAKA RO	Name of Contact Person	1	
RKR BEVER	AIDE		
	Firm/ Company		
649 PENSACOLA BEACH BLUD			
	Address	0 a 5 ;)	
PENSAKOLA B	City/ State and Zip Code	32561	
ALOHAWL@ UN E-mail address: (to be use	NAIL - COH d for future annual report	notification)	
For further information concerning this matter, please	call:		
LOPAKA ROBELLO	at (850	723-8666	
Name of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made pa	yable to the Florida Depa	artment of State:	
S35 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations	Amend Divisio	Address Iment Section on of Corporations	

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

RKR BEVERAGE, INC	·
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P07000019707	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s 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 "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	PENSACOLA BEACH BLU PENSACOLA BEACH, FL 32561
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 address new registered agent and/or the new registered office address	
Name of New Registered Agent	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
(Florida si	treet address)
New Registered Office Address:	(City) Florida — (Zip Code):
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	nt: r with and accept the obligations of the position.
Signature of New	Registered Agent, if 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.

Example: XChange	<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>	<u>Name</u>	Address
1) Change Add Remove	<u>V, D</u>	KAIPO ROBELLO	2631 GULF BREEZE, FL 32563
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

	
f an amendment provides for an exchange, reclassification, or cancellation of issued sh	19706
provisions for implementing the amendment if not contained in the amendment itself:	<u>ures</u>
(if not applicable, indicate N/A)	
• • • • • • • • • • • • • • • • • • • •	

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	
(no more than 90 days after amendment	file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requoument's effective date on the Department of State's records.	uirements, 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 by the shareholders was/were sufficient for approval.	r the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the a	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by(voting group)	••• ••
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder act action was not required.	ion and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action a action was not required.	nd shareholder
Dated 9-27-19	
Signature 1 Va	
Signature (By a director) predident or other officer – if directors or offic selected, by an incorporator – if in the hands of a receiver, tru appointed fiduciary by that fiduciary)	ers have not been stee, or other court
LOPAKA ROBELLO	
(Typed or printed name of person signing)	
OWNER, PRESIDEN	7
(Title of person signing)	