P08000094732

(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:





700416577797

10/10/23--01024--015 *+35.00



COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Name of Contact Person at (772), 226-6894

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

HEC, Liquor Inc	·
(Name of Corporation as current)	v filed with the Florida Dept. of State)
P18000094-	<i>132.</i>
<u> </u>	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
NIA	The new
name must be distinguishable and contain the word "corporation," "or "Inc.," or Co.," or the designation "Corp," "Inc." or "Co", a "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	Ven Beach, FL.32980
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1601 20th Street = 3 Vero Beach. FL 32968
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address. Name of New Registered Agent (0) 2.6	A. Sullivan, Ur.
New Registered Office Address: Vero Bea	reet address) (h , Florida 32960 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position.
Signature of New I	Registered Agent, if changing
Check if applicable	

 \square 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)

Add

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: X Change PT John Doe X Remove Mike Jones <u>SV</u> <u>X</u> Add Sally Smith Address Type of Action Title Name | (Check One) Sillivan Michael A. Jr. 1) X Change ____ Add Remove NPO Bothaug, Robert __ Add Remove SD Sullivan, Maggie 3) _★_ Change Add Remove Blanford, Allyson 4) X Change _ Add Remove 5) ____ Change Add _ Remove 6) ____ Change

tach additional sheets, if necessary). (Be specific) NA		
	<u> </u>	
		~
	<u></u>	2013 00
	-	<u></u>
		10
	· · ·	PH_
		2
an amendment provides for an exchange, reclassification, or cancellation of issued shares		
rovisions for implementing the amendment if not contained in the amendment itself:	1	
(if not applicable, indicate N/A)		
N/A		
		<u> </u>
	•	

The date of each amendment(s) adoption:	, if other than
date this document was signed.	
Effective date if applicable: N/A	
(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 wi document's effective date on the Department of State's records.	ll not be listed as
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action an action was not required.	d shareholder
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.	20'
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):	2023 OCT 10 PH 1: 02
"The number of votes cast for the amendment(s) was/were sufficient for approval	10 PH
(voting group)	-: 0
Dated September 18, 2023	2
Signature	
(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)	
Michael A. Sullivan. Jr. (Typed or printed name of person signing)	
President/Director	
(Title of person sighing)	

the

the