PU9000101100

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	Punta G Liquor In	c.			
DOCUMENT NUM	DO0000101100				
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	itter to the following:			
	Gopi naik				
		Name of Contact Person	1		
	Punta G Liquor inc, dba: PGI Liquors				
	·	Firm/ Company			
	615 cross street suite # 1103				
	Address				
	Punta Gorda Florida 33950				
		City/ State and Zip Code	e		
	flimcity@aim.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:			
GOPI NAIK		at {) _};		
Name	of Contact Person	Area Coa	de & Daytime Telephone Number		
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

O9000101100 (Document Number of Corp.	
(Document Number of Corp	
	oration (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> s Articles of Incorporation:	a Profit Corporation adopts the following amendment
. If amending name, enter the new name of the corporation:	
ame must be distinguishable and contain the word "corporation," "compai Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A profe chartered," "professional association," or the abbreviation "P.A."	The new ny, "or "incorporated" or the abbreviation "Corp.," essional corporation name must contain the word
Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	
. Enter new mailing address, if applicable:	2020 7.
(Mailing address MAY BE A POST OFFICE BOX)	
	Florida, enter the name of the
the amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	Florida, enter the name of the
Name of New Registered Agent	
<u></u>	
(Florida street addi	ress)
New Registered Office Address:	, Florida
(City)	(Zip Code)

☐ 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, at 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 = Chi Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office het 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT John	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Namc</u>	<u>Addres</u> s
1) Change	Advisor	Chandrajeet Naik	
X Add			7570 Sika Deer Way Fort myers fl3
Remove			<u>33941</u>
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			-
Add			
Remove			
6) Change			
Add			
Remove			

mending or adding additional Artical ach additional sheets, if necessary).	Hes, enter change(s) here:		
ach additional sneets, if necessary).	(ne specific)		
		-	
		<u> </u>	
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			_
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		<u> </u>	
			
n amendment provides for an excha ovisions for implementing the amen	inge, reclassification, or car idment if not contained in t	icellation of issued shares,	
(if not applicable, indicate N/A)		ne amenument usen.	
			
		_	
		····	_

• •	August 06 2020	•
The date of each amendmen		, if other than th
date this document was signed		
Effective date if applicable:	August 06 2020	
	(no more than 90 days after	amendment file date)
	this block does not meet the applicable statute he Department of State's records.	ory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of dir	rectors without shareholder action and shareholder
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of ere sufficient for approval.	f votes east for the amendment(s)
	re approved by the shareholders through voting d for each voting group entitled to vote separa	
"The number of votes	cast for the amendment(s) was/were sufficien	t for approval
bv		·
-	(voting group)	
aug O	5 2020	
Dated		
	Smait	
Signature	John	
se	y a director, president or other officer – if directled, by an incorporator – if in the hands of a pointed fiduciary by that fiduciary)	
	Gopi Naik	
	(Typed or printed name of per	rson signing)
	PRESIDENT	
	(Title of person signing)	