P10000056258

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

Office Use Only



500208604535



06/20/11--01015--013 **35.60

2011 JUN 20 PH 3 44 SECRETARY OF STATE

DOR 6/1/11

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORI	PORATICN:	HOT SHOT BEVERAGE	OT SHOT BEVERAGE INC		
DOCUMENT NU	MBER:	Document Number P100	00056258		
The enclosed Artic	cles of Amandment and fe	ee are submitted for filing.			
Please return all co	orrespondence concerning	this matter to the following:			
		Howard S Helfant			
		Name of Contact Person			
	Howie's	s HOT SHOT Beverage, LLC			
		Firm/ Company			
	1	120 Holland Dr; Ste 20			
		Address			
		Boca Raton FL 33487			
		City/ State and Zip Code			
	H@h E-mail address: (to be	otshotbeverage.com used for future annual report notification)			
For further informa	ation concerning this matt	er, please call:			
Н	oward S. Helfant	ut (143-3334		
Name of Contact l'erson		Area Code & Daytime Te	elephone Number		
Enclosed is a check	k for the following amour	t made payable to the Florida Depa	rtment of State:		
✓ \$35 Filing Fee	\$43.75 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 P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building			

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2011 JUN 20 PM 3 44

Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) , Florida (City) (Zip Code)			THI JOH TO I'M O I'
(Name of Corporation as currently filed with the Florida Dept. of Sete HASSEL. FLURIUS DC cument Number P10000056258 (Document Number of Corporation (if known) Irsuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the followed memory of the provisions of section for the designation: If amending name, enter the new name of the corporation: The new memory of the designation "Corp.," "Inc.," or "incorporated" or the breviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation memory of the abbreviation "P.A." Enter new principal office address, if applicable: rincipal office address MUSTBE A STREET ADDRESS Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) [Florida	HOT SHOT	BEVERAGE INC	CECRETARY OF STATE
If amending the registered agent and/or registered office address: Document Number of Corporation (if known)	(Name of Corporation as curre	ntly filed with the Florid	la Dept. of StateAHASSEE, FLORIDA
If amending the registered agent and/or registered office address: Document Number of Corporation (if known)	Dccument Nur	mber P100000562	58
If amending name, enter t 1e new name of the corporation: The new me must be distinguishable and contain the word "corporation," "company," or "incorporated" or the breviation "Corp,," "Inc.," or "Co.," or the designation "Corp, "inc.," or "Co". A professional corporation me must contain the word "c tartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: rincipal office address MUS F BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office 1 ddress: (Florida street address) [Florida			
The new une must be distinguishable and contain the word "corporation," "company," or "incorporated" or the obreviation "Corp.," "Inc.," or "Co.". A professional corporation une must contain the word "c'artered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: Principal office address MUS F BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office 4 ddress: (City) (Zip Code)		5, Florida Statutes, this F	Florida Profit Corporation adopts the follow
me must be distinguishable and contain the word "corporation," "company," or "incorporated" or the breviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation me must contain the word "c vartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: rincipal office address MUS r BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) , Florida (City) (Zip Code)	If amending name, enter t 1e new name of	the corporation:	
breviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation ame must contain the word "c'nartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: Principal office address MUS [BE A STREET ADDRESS] Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office 4 ddress: (Florida street address) [City] (Zip Code)			The new
. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) , Florida	bbreviation "Corp.," "Inc.," or Co.," or the	designation "Corp," "Inc	c," or "Co". A professional corporation
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office A ddress: (Florida street address) , Florida (City) (Zip Code)	Enter new principal office address, if appl	licable:	
If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent:			
If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent:			
If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent:		<u></u>	
Mailing address MAY BE A POST OFFICE BOX If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) , Florida (City) (Zip Code)	Enter new mailing address, if applicable:		
Name of New Registered Agent: New Registered Office Address: (Florida street address) , Florida (City) (Zip Code)			
Name of New Registered Agent: New Registered Office Address: (Florida street address) , Florida (City) (Zip Code)			
Name of New Registered Agent: New Registered Office 1. ddress: (Florida street address) , Florida (City) (Zip Code)			
Name of New Registered Agent: New Registered Office Address: (Florida street address) , Florida (City) (Zip Code)	If amending the registered agent and/or r	egistered office address i	in Florida, enter the name of the
New Registered Office Address: (Florida street address) , Florida (City) (Zip Code)			
, Florida (City) (Zip Code)	Name of New Registered Agent:		
(City) (Zip Code)			
(City) (Zip Code)	New Registered Office Address: (Florida si		address)
(City) (Zip Code)			Etarida
	-	(Citv)	
ew Registered Agent's Signa ture, if changing Registered Agent:		, •	, ,
nereby accept the appointmen' as registered agent. I am familiar with and accept the obligations of the position.			1 11 11 11 11 11

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)

<u>Title</u>	<u>Name</u>		<u>Address</u>	Type of Action
		- 		☐ Add☐ Remove
	<u></u>			
				☐ Add☐ Remove
		ditional Articles, ent necessary). (Be spe		
provis		ing the amendment	reclassification, or cance if not contained in the a	
Corporat	e shares to be c	nanged from 5,000	0,000 to 100,000,000	
Change	par value to .001			

o verter de la company de la			
The date of each amendmen	t(s) adoption: 06/14/2011		
Effective date if applicable:	(date of adoption is required)		
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
	er: adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.		
	approved by the shareholders through voting groups. The following statement ec 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)		
The amendment(s) was/we action was not required.	adopted by the board of directors without shareholder action and shareholder		
The amendment(s) was/we action was not required.	adopted by the incorporators without shareholder action and shareholder		
sele	a director, president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court or inted fiduciary by that fiduciary)		
	Harrand C. Halfant		
" maz"	Howard S. Helfant (Typed or printed name of person signing)		

··- ...