

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
		MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	ly



10/31/17--01024--029 **52.50



C. GOLDEN NOV 01 2017

COVER LETTER

TO: Amendment Section

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Division of Corporations

NAME OF CORPORATION:	Beer: 30 In	<u> </u>
DOCUMENT NUMBER:	P120000 13380	

The enclosed Articles of Amendment and fee are submitted for tiling.

Please return all correspondence concerning this matter to the following:

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Warren Fryefield
Name of Contact Person
Beer: SU Inc
Firm/ Company
1448 Ingleside Ave Address
J Address
Jacksonville FL 32204
City/ State and Zip Code
Warren Obeer 30, wx, com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

at (<u>909</u>) <u>8999-9050</u> Area Code & Daytime Telephone Number Warren Frjehild Name of Contact Person

Enclosed is a check for the following amount made payable to the Florida Department 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

Amendment Section Division of Corporations **Clifton Building** 2661 Executive Center Circle

Tallahassee, FL 32301

Street Address

to Articles of Inc	orporation	FILED
of	-	2017 007 01 000
Beer 30 Inc		2017 OCT 31 PM 3: 29
(<u>Name of Corporation as current</u>	y filed with the Florida Dept. of	State)
P1200013380 (Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607,1006. Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation adopt	s the following amendment(s) to
A. If amending name, enter the new name of the corporation:		77
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or " word "chartered," "professional association." or the abbreviation "	Co". A professional corporation	
3. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRESS</u>)	1271 King Jacksonville,	54 FL 37704
2. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	1271 King Jacksonville, T	54 FL 32204
 If amending the registered agent and/or registered office addu new registered agent and/or the new registered office address 		<u>f the</u>
Name of New Registered Agent		
<u>New Registered Office Address</u> : <u>Jacksonvill</u>	eer address) eer address) eer FL, Flo (City)	orida <u>37704</u> (Zip Code)

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: X Change \underline{PT} John Doe X Remove <u>V</u> Mike Jones <u>X</u> Add SV Sally Smith Type of Action Title Name Address (Check One) 1139 Talbot Ave V Many 1) ____ Change Justen Jux FL 32205 ____ Add X Remove Engled Perna 837 6th Aix D. 2) ____ Change X Add Jan Beach FL 32350 Remove 1105 2nd 54 Brooks M. Whaten 3) ____ Change Neptune Beach, FL 32266 Remove 4) ____ Change ____ Add ____ Remove 5) ____ Change ____ Add ____ Remove 6) Change _____ Add _ Remove

Attach additional sheets, if necess	<u>l Articles, enter chai</u> ary). (Be specific)	<u></u>		
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	<u></u>			
f an amendment provides for an	<u>exchange, reclassifi</u>	cation, or cancellat	tion of issued shares.	L
provisions for implementing the	<u>: amendment if not c</u>	ontained in the am	<u>endment itself:</u>	
(if not applicable, indicate N	(A)			
·····				

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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)

X 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)

- The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated	10/10/17	
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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)

(Typed or printed name of person signing)

President (Title of person signing)