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COVER LETTER

Division of Corporations 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: Brett Isaa (
Name of Contact Person E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 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 & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of			
Ellis	Discount	Beveraci	Tract

(Name of Corporation as currently filed with the Florida Dept. of State) P12000 62527 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following its Articles of Incorporation:	. <u>.</u>	
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:		
·	g amend	lment(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the al "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must of word "chartered," "professional association," or the abbreviation "P.A."	_ h.hai.a.e	iew ion the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	-	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		-
	2813	_
D. 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:	<u>к</u> ис 23	
Name of New Registered Agent CC:	РН 3:	D.
(Florida street address) New Registered Office Address: Florida	26	
Florida (City) (Zip C	ode)	_

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	<u>PT</u> <u>John</u>	Doc	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	<u>SV</u> <u>Saily</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Lange	<u>P</u>	Schel Dahi	3316 WERMI Pr.
Add			JULKYONVIlle, FL 32216
Remove			
2) Change	UP	Elic Chamoun	8521 San Jose Blud.
Add			Jacksonville, FL 32217
Remove 3)Change	<u>P</u>	Dani Salanch	Julksonville FL 32216
Remove			Jalescono MP 1032218
4) Change	VP	Loulon Darkheel	3210 WGMENT DI. Delesonulle Fe 32216
			Je c resonville - c 32216
Remove			
5) Change			2018
Add			Sa Sa S
Remove			SERV 23 F
6) Change			FINE D
Add			26
Remove			

f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
	
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provisions for implementing the amendment if not contained in the amendment itself.	IUG 23 VETARY VHASSE
an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
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provisions for implementing the amendment if not contained in the amendment itself.	

The date of each amendment(s) adoption:date this document was signed.	8/	23	19		 · · · · ·	, if other than th
Effective date <u>if applicable</u> :	more than 9	23	after amount	dment file date)		
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Note: If the date inserted in this block does not m document's effective date on the Department of State	eet the applications of the seconds.	able s	tatutory fil	ing requirements, t	his date wi	Il not be listed as th
Adoption of Amendment(s) (CHECH	(ONE)					
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"The number of votes east for the amendme				proval		
by (voting §				**		
(voting g	group)			 •		
The amendment(s) was/were adopted by the board action was not required.	d of directors	withou	ıt sharehold			
☐ The amendment(s) was/were adopted by the incoraction was not required.		out sh	reholder a	ction and sharehold	ler	
Dated 8 23 15 Signature 8 23 15	14	>			26 20 20	2019 F
Signature 2	100				<u> </u>	Fill Aug 2
(By a director, president selected, by an incorpor	or other offic	er – if e bands	directors of	r officers have not	been S	FILED 623 M
appointed fiduciary by t	hat fiduciary)	o mana,	or a recer	er, trustee, or other	، دوشتر حر ا	<u></u>
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(Туре	ed or printed i	name o	f person si	gning)	芸芸	26
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