## P13000061957

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Walker .



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: EXCLUSIVE DOCUMENT NUMBER: P13000061	WINES AND SP	IRITS INC.
The enclosed Articles of Amendment and fee are su	ubmitted for filing.	· ·
Please return all correspondence concerning this ma	atter to the following:	,
YIMMY ALVAF	REZ	
EXCLUSIVE V		
8645 SW 152r		174
MIAMI, FLORI	DA 33193	
	City/ State and Zip Cod	e
YALVAREZ1212(		
E-mail address: (to be u	sed for future annual report	notification)
For further information concerning this matter, plea	se call:	i
YIMMY ALVAREZ	at(305	,9658699
Name of Contact Person	Area Code & Daytime Telephone Numb	
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 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 Tallahassee, FL 32314	Ameno Divisio Clifton	Address  Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## EXCLUSIVE WINES AND SPIRITS, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P13000061957

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendments Articles of Incorporation:

N/A		The new
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corpor	
B. Enter new principal office address, if applicable:	N/A	<u> </u>
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		
C. Enter new mailing address, if applicable:	N1/A	
(Mailing address MAY BE A POST OFFICE BOX)	N/A	<u> </u>
		: 52
	·	
D. If amending the registered agent and/or registered office a	ddress in Florida, enter the na	me of the
new registered agent and/or the new registered office addr		<del>-</del>
Name of New Registered Agent N/A		
Nume of New Registered Agent		_
(Eluida	street address)	_
Non Basisana Allana N/A	sireet adaress)	
New Registered Office Address: N/A	. Florid	a
New Registered Office Address:		(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u> .	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PTD	REGLA JIMENEZ	8645 SW 152 AVE SUITE 174
X Add			MIAMI, FLORIDA, 33193
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	<del></del>	·	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		:	

E. If amending or adding additional Art	ticles, enter chang	e(s) here:		
(Attach additional sheets, if necessary). $\bigvee A$	(Be specific)			
VII V				
			· <del>-</del>	<u> </u>
. 18				
	<del></del>			
<del>7</del> =				
			•	
			<u></u>	
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		****		. <u>.</u>
				<del></del>
			<u>.</u> ,	
				<u> </u>
. If an amendment provides for an exc	hange, reclassific	ation, or cancell	ation of issued sha	res.
provisions for implementing the am (if not applicable, indicate N/A)	endment if not co	ntained in the ar	nendment itself:	<u> </u>
N/A			<del>-</del>	7-44E
		<u> </u>		<del></del>
			<del>-</del>	<del></del>
		<u></u>		
n 440 r., 1 50 r., 1 50 r., 1			*	
			, a.m.,a.	

The date of each amendment(s) ad	AUGUST 6th, 2013	, if other than the
date this document was signed.  Effective date if applicable:	JGUST 6th, 2013	
Ellettive date it applicable.	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated_AUG	UST 6th, 2013	
Signature	Hanna Sleves;	
(By a di selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	YIMMY ALVAREZ	
	(Typed or printed name of person signing)	
	VP ·	
	(Title of person signing)	<del></del>