P130000 75130

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Amendec

AUG 1 5 2019 I ALBRITTON

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: KAYS B.P. II	NC
DOCUMENT NUMBER: P13000075130	
The enclosed Articles of Amendment and fee a	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
KARIM HEMDANI	
	Name of Contact Person
KARR LIQUORS INC	
	Firm/ Company
3077 ANDERSON SNO	OW RD
	Address
SPRING HILL, FL. 340	509
	City/ State and Zip Code
WAREHOUSEWNL@GMA	IL.COM
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter,	please call:
KARIM HEMDAN	VI at 35Z, ZDS 810D
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount r	made payable to the Florida Department of State:
□ \$35 Filing Fee □ \$43.75 Filing Fe Certificate of Sta	
Mailing Address 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

KAYS B.P. INC	
(Name of Corporation as currently f	iled with the Florida Dept. of State)
P13000075130	
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fla</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	2!
	(a)
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	L2
D. If amending the registered agent and/or registered office address	s in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent KAKIM M	EMDANI
3077 ANNERS	SON SNOW RD. SPRINGHILL.
(Florida street	
New Registered Office Address: SPRING HIL	1 Marida 34609
New Registered Office Address: > (C	1 Florida 34607 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	
Signature of New Reg	istered 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 = Chie 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:		ty omin, or as an naa.	
X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PT	KARIM HEMDANI	3077 ANDERSON SNOW RD
X Add			SPRING HILL, FL 34609
Remove			
2) Change	<u>P</u>	RESHMA VIRANI	13315 HAVERHILLL DR
Add			SPRING HILL, FL 34609
X Remove			
3) Change			
Add			
Remove			·
4) Change			
Add			
Remove			
5) Change		 	
Add			
Remove			
6) Change			
Add			
Remove			

macii naamonat 3/	ling additional Articles, of heets, if necessary). (Be	specific)			
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an amendment p	provides for an exchange	<u>, reclassification, o</u>	r cancellation of i	ssued shares,	
orovisions for imp	plementing the amendme	nt if not contained	in th <u>e amendme</u> n	t itself:	
(у погарриса	ble, indicate N/A)				
				•	
		· · · · · · · · · · · · · · · · · · ·			

	adoption:	, if other than t
date this document was signed.		
8/ Effective date <u>if applicable</u> :	8/2019	
enective date <u>ii applicative</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	ate will not be listed as t
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes cast for the amendment(sufficient for approval.	s)
	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and sharehold adopted by the incorporators without shareholder action and shareholder	сг
action was not required.	adopted by the meorporators without shareholder action and shareholder	
08/08/20	119	
Dated		
	K 1 1 1 1 2	
Signature	a director, president or other officer – if directors or officers have not been	
	a director, president or other officer – it directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other cou	
	pinted fiduciary by that fiduciary)	
	RESHMA VIRANI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	