P14000036129

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
arong S	erce~	

Office Use Only



200281064802

01/20/16--01015--021 **35.00

16 JAN 22 AH II: 33

Jonaho eman

COVER LETTER

TO: Amendment Section
Division of Corporations

	10 H	و موس				
NAME OF CORPORA	TION:	group service	25			
DOCUMENT NUMBE	R: P 1406	50 36129	25			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.				
Please return all correspo	ndence concerning this ma	atter to the following:	•			
	Richa	22 BANTOCK				
		Name of Contact Perso				
		Firm/ Company		_		
	4006 pc	DINCIA-NA	01	i		
_		Address	Ma Ma Maria	- ≯·s	5	
	DAPM HA	abon EL	34684		JAN 22	7
_		City/ State and Zip Cod	c		10	
	CAL- 20 TL.	1			2	} {
	Frank address (to be)	higues acoust second	acer suy, com	, s		
	to-mail auditess. (to be th	sou for future armual report	(totttication)	- 1		
For further information o	oncerning this matter, plear	se call:		187,	(ب) (بن	
•	-			_		
Riewal	BANTOELL	at (& (3	ode & Daytime Telephone Numb			
Name of t	Contact Person	Area Co	de & Daytime Telephone Numb	er		
Enclosed is a check for th	ne following amount made	payable to the Florida Dep	artiment of State:			
S35 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)			
	g Address ment Section		Address Iment Section			

Division of Corporations P.O. Box 6327 Tallabassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RICHARD BANTOCK

4006 POINCIANA CT

PALM HARBOR, FL 34684

(H)727-781-1192 (M)813-758-8801

FAX 727-489-7791

E-MAIL SALES@IHELIQUORLICENSEGUY.COM

FA	CSIMILE TRANSMITTAL SHEET
то:	FROM:
Diane	Richard Bantock
COMPANY:	DATE:
Florida Department of Stat	ne 1/22/2016
FAX NUMBER:	TOTAL NO. OF PAGES, INCLUDING COVER:
850-245-6897	7
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
RE:	YOUR REPERENCE NUMBER:
Name Change	
□ urgent □ for review	□ PLEASE COMMENT □ PLEASE REPLY □ PLEASE RECYCLE
NOTES/COMMENTS:	
Hello Diane,	
I called to check the status	of the name change for document P14000036129 Apollo Group

Services. I would like to change the name to Liquor License Consultants. My understanding is that you still have the funds I submitted. I am faxing the correct paper work to help

expedite the process. I am a little behind in my schedule and it is my own fault.



January 21, 2016

RICHARD BANTOCK 4006 POINCIANA CT PALM HARBOR, FL 34684

SUBJECT: APOLLO GROUP SERVICES, INC

Ref. Number: P14000036129

We have received your document for APOLLO GROUP SERVICES, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have completed the wrong application. You completed the form for a Foreign Corporation and you are a Florida Corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 416A00001374

Diane Cushing Senior Section Administrator

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

A poll o group service	615 , Trc filed with the Florida Dept, of State)
P1400003612	.P
(Document Number of	
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s)
A. If amending name, onter the new name of the corporation:	
name must be distinguishable and contain the word "corporation,	onsultants, I've 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	o". A professional corporation name must contain the
•	FG O
B. Enter new principal office address. If applicable: (Principal office address MUST BE A STREET ADDRESS)	
,	2 2
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ts in Florida, enter the name of the
Name of New Registered Agent	
(Florida strét	address)
New Registered Office Address:	, Florida
	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
Signature of New Re	gistered 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 Chango	PT	John Doe	·
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
_X Add	SY	Saily Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add			**************************************
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Kennae			ALL TO THE STATE OF THE STATE O
6) Change	<u> </u>		
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
	
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
ц погаррисине, такан N/A)	
(y noi appucavie, maicaie N/A)	
(y noi appucavie, maicaie N/A)	
(y noi appucavie, maicaie N/A)	
(y noi appucable, maicale N/A)	
(y noi applicable, traicale N/A)	
(y noi applicable, traicale N/A)	

The date of each amendment(s) adoption:date this document was signed.	1-22-2016	if other than the
Effective date if applicable:	(no more than 90 days after umendment file date)	
	(no more than 90 days after umendment file date)	
Note: If the date inserted in this block does a document's effective date on the Department of	not meet the applicable statutory filing requirements, this date will f State's records.	not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes east for the amendment(s) approval.	
	se shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):	
"The number of votes cast for the ame	ndment(s) was/were sufficient for approval	
by		
(vo	ting group)	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder	Sec. 16
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder	
Dated/	22-2016	R
_		E: Y-4:
Signature		္ ယွ
selected, by an inc	sident or other officer - if directors or officers have not been orporator - if in the hands of a receiver, trustee, or other court y by that fiduciary)	
	Richard Bantoe 1-	·
	(Typed or printed name of person signing)	
	presilent	
	(Title of person signing)	