P17000056282

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Old Liquors Inc.		
	1BER: P17000056282		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all cort	respondence concerning this ma	tter to the following:	
	GASTON	R CORTES	ClA
		Name of Contact Person	1
	KSDT & COMPANY		
		Firm/ Company	
	9300 \$ DADELAND BLVD	SUITE 600	
		Address	
	MIAMI, FL 33156		
		City/ State and Zip Code	<u> </u>
	,	ocata Oko	1t = c a c
	E-mail address; (to be us	acortes (ksc	notification)
For further informat	ion concerning this matter, pleas	se call:	
GASTON	, R CORTES, CPA	at (<u>305</u> _	670 -3370 de & Daytime Telephone Number
Nam	e of Contact Person	Area Cod	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	urtment of State:
■ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
А D Р.	mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Ameno Divisio The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303



Articles of Amendment to Articles of Incorporation of

OLD LIQUORS INC	5000
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
17000056282	
(Document Number	r of Corporation (if known)
ursuant to the provisions of section 607,1006. Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s
. If amending name, enter the new name of the corporation:	
ame must be distinguishable and contain the word "corporation," lnc.," or Co.," or the designation "Corp," "lnc," or "Co", chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address Name of New Registered Agent	
(0)	
(Florua)	street address)
New Registered Office Address:	(City) . Florida . (Zip Code)
ew Registered Agent's Signature, if changing Registered Age hereby accept the appointment as registered agent.—I am familia	ent:
Signature of Vene	v Registered Agent, if changing
	and the state of t
heck if applicable	

 \square The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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:

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>	<u>Name</u>	<u>Addres</u> s
1) Change	PD	Verbeek, Marianne Yvonne	9300 S Dadeland Blvd
Add			Suite 600
X Remove			Miami, FL 33156
2) Change		_	
Add			
Remove 3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessar	y). (Be specific)			
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		 ,	 _	
				
			·	<u> </u>
<u></u>				
				
				
an amendment provides for an	exchange, reclassificati	ion, or cancellation o	of issued shares,	
an amendment provides for an provisions for implementing the (if not applicable, indicate N'	amendment if not cont	ained in the amenda	nent itself:	
$=$ (if not applicable, indicate $N'_{ec{c}}$	<i>i</i>)			
				
				

12/01/2021	
The date of each amendment(s) adoption:	than the
ate this document was signed.	
12/01/2021	
Effective date if applicable:	
tno 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 list document's effective date on the Department of State's records.	ed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
□ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholde action was not required.	r
The amendment(s) was/were adopted by the shareholders. The number of votes east 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)	
02/11/2022 Dated	
(By a frector, president or other efficer – if directors or officers have not been selected, by an irreorporator of in the hands of a receiver, trustee, or other court appointed fiduciary by that (iduciary)	
Mr. H. Karaca	
(Typed or printed name of person signing)	•
President	
(Title of person signing)	•