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SECRETARY OF STATE, ALL AHASSEF, FROM

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: Bottle Service On	ly, S.Corp			
DOCUMENT NUMI			1		
The enclosed Articles	of Amendment and fee are st	ibmitted for filing.			
Please return all corre	spondence concerning this ma	atter to the following:			
	Harry J Catton				
		Name of Contact Person			
Firm/ Company					
	2750 N 29Th Ave Suite 126				
Address					
	Hollywood, Fl 33020				
		City/ State and Zip Cod			
harry	j@hfgnow.com	sed for future annual report	natitioation		
For further information	n concerning this matter, plea				
Harry J Catton		at (646	372-8296		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:		
\$35 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)		
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

Bottle Service Only, S.Corp

(Name of Corporation	as currently filed with the Florida Dept. of State)
P18000052107	
(Docume)	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	ogration:
Bottle Service Only, INC	
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	<u>ESS</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SECRETARY OF STALL AND SECRETARY OF STALL AND SEE FLO
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
	un familiar with and accept the obligations of the position.
Signati	ure 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.

Example:	v, ana sai	iy əman, əv as un Aaa,	
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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			_
Remove			
3) Change			
Add			
Remove			
4) Change	_		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
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f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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The date of each amendment(s) ado date this document was signed.	otion:		, if other than the
Effective date <u>if applicable</u> : '			
Effective date <u>if applicable</u> :	(no more than 90 day	s after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Depa	ek does not meet the applicable rtment of State's records.	statutory filing requirements, this date w	rill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were adopt by the shareholders was/were suffi		ber of votes cast for the amendment(s)	
☐ The amendment(s) was/were appromust be separately provided for ea	ved by the shareholders through veh voting group entitled to vote s	voting groups. The following statement separately on the amendment(s):	
	the amendment(s) was/were suff	• •	
by	(voting group)		
	(voting group)		
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors witho	out shareholder action and shareholder	
The amendment(s) was/were adopt action was not required.	ed by the incorporators without sl	hareholder action and shareholder	
07/16/18 Dated			
	luca	-	
selected.		if directors or officers have not been ds of a receiver, trustee, or other court	
H	arry J Catton		
_	(Typed or printed name	of person signing)	
	Sec.		
	(Title of per	son signing)	