## P180000 69757

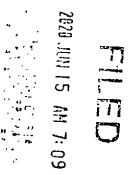
(Re	questor's Name)	
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Certified Copies	_ Certificates	of Status
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JUL 10 2020 S. YOUNG

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 30Ca's BEST WINE & LIQUOY COOP.					
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Name of Contact Person					
Boca's Sest Wine & Liquor Corp. Firm/Company					
1200 Yamato Pd Juit C3 Address					
Soca Pulm Pl 33431 City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
3001587  Name of Contact Person  at (501) 3001587  Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  S52.50 Filing Fee Certificate of Status (Additional Copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

of

300a's Best	Wine & Ligur Corp	l <u></u>
(Name of Corp	oration as currently filed with the Florida'D	ept. of State)
P 18 0000 60	1757	
(I	Occument Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	Florida Statutes, this Florida Profit Corporation	n adopts the following amendment(s) to
A. If amending name, enter the new name of	the corporation:	
		The new
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the	"Inc," or "Co". A professional corporation	
B. Enter new principal office address, if appli	icable:	
(Principal office address MUST BE A STREET		
	-	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	E BOX)	
		<del></del>
		•
D. If amending the registered agent and/or re		name of the
new registered agent and/or the new regist	tered office address:	
Name of New Registered Agent		
<del></del>	(Florida street address)	
New Registered Office Address:		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag		ions of the position
Thereby accept the appointment as registered ag	en. I un jumiur win una accept inc oonga	ions of the position.
		E COMPANY
	Signature of New Registered Agent, if changing	8 55 01
Check if applicable		ा देखें हैं । 🛅
☑ 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:

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: X Change PT John Doe X Remove V Mike Jones X Add <u>SV</u> Sally Smith Type of Action Title Name <u>Address</u> (Check One) VP 350 (LWD Circle Dr 1) \_\_\_\_ Change apt 108 Add BOCA RAIDON PL 33487 Barbara Fischer ٧P 3110 San Clara Dr 2) \_\_\_\_ Change ✓ Add unit 17c Delray Reach FC 33445 Remove Change \_\_\_ Add Remove Change Add Remove 5) \_\_\_\_ Change Add Remove 6) \_\_\_\_ Change Add Remove

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	
	<del></del>	
		••
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
		_

.

The date of each amendment(s) as date this document was signed.	option:	, if other than the
•		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file do	nte)
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirem partment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shar	eholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the efficient for approval.	amendment(s)
7.7	roved by the shareholders through voting groups. The follo each voting group entitled to vote separately on the amenda	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
(By a di selected	rector, president or other officer – if directors or officers have by an incorporator – if in the hands of a receiver, trustee, or offiduciary by that fiduciary)	ve not been or other court
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	