## P20 000057521

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## COVER LETTER, . .

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	ION:	OBSESSION LIQUOR.	INC.			
DOCUMENT NUMBER		P20000057521				
The enclosed Articles of A		ibmitted for filing.				
Please return all correspond	dence concerning this ma	itter to the following:				
			****			
		ANNIA DOMIGU				
		Name of Contact Person	•			
		OBSESSION LIQUOR.	, INC.			
		Firm/ Company				
	10400 NW 131 STREET					
	111	Address	2010			
		IALEAH GARDENS, FL 3				
		City/ State and Zip Cod	le			
		my1_garden@yahoo.co	əm			
	E-mail address: (to be us	sed for future annual report	notification)			
For further information cor	icerning this matter, plea	se call:				
ANNIA DOMINGUEZ		at ( 305	815-8689			
Name of Co	ontact Person		de & Daytime Telephone Number			
Enclosed is a check for the	following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	XI\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing		Street	Address			
	ent Section of Corporations		ment Section n of Corporations			
P.O. Box			entre of Tallahassee			
Tallahass	see, FL 32314	2415 N	N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

to

	OBSESSION LIC	UOR, INC.				
(Name of Corpo	ration as currently	filed with the Florida	a Dept. of State)			
	P2000005	57521				
(De	cument Number of	Corporation (if known	)			
Pursuant to the provisions of section 607,1006, Floits Articles of Incorporation:	orida Statutes, this F	lorida Profit Corpora	tion adopts the fo	llowing amendment(s)		
A. If amending name, enter the new name of th	e corporation:					
	N	J/A		The new		
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "I "chartered," "professional association," or the al	nc," or "Co". A	mpany," or "incorpor professional corpora	rated" or the abbr tion name must (	eviation "Corp.,"		
B. Enter new principal office address, if application	able:	10400 NW 131 STREET				
(Principal office address MUST BE A STREET A		HIALEAH GARDI	ENS, FL 33018			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	10400 NW 131 STREET					
		HIALEAH GARDE	ENS. FL 33018			
D. If amending the registered agent and/or reginew registered agent and/or the new register		ss in Florida, enter tl	ie name of the			
Name of New Registered Agent	ANNIA D	OMINGUEZ				
	10400 NV	V 131 STREET				
	(Florida stree	t address)				
New Registered Office Address: HIALEAH GARDENS Florida 33018						
	10	'ity)		(Zip Code)		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered Agent: nt. I am familiar wi	th and accept the oblig	gations of the pos	ition.		
	1					
, OH	1991			2021		
S	ignuture of New Reg	istered Agent, if chang	zing	( <u>.                                    </u>		

Check if applicable

☐ 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)

Example:

\_ Remove

Add

6) \_\_\_\_ Change

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.

## X Change PT. John Doe X Remove V Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Type of Action Title <u>Name</u> Address (Check One) 1850 W 84 STREET MASSON, ISIS 1) \_\_\_\_ Change HIALEAH, FL 33014 \_\_\_\_ Add \_X\_ Remove 2) X Change PST DOMINGUEZ, ANNIA 10400 NW 131 ST HIALEAH GARDENS, FL 33018 \_\_\_\_ Add Remove 3) Change \_\_\_ Add \_\_ Remove 4) \_\_\_\_ Change \_\_\_ Add \_ Remove 5) \_\_\_\_ Change \_\_ Add

`	s, if necessary). (Be			
		N/A		
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F. If an amendment provi	ides for an evehance	reclassification or a	annallation of iccuad ch	46 P 11 C
provisions for implem	<u>ienting t</u> he amendme	ent if not contained in	the amendment itself:	<u> </u>
(if not applicable, i	indicate N/A)	NT/ A		
		N/A	<del></del>	

MAY 18, 2021 if other than the The date of each amendment(s) adoption: \_\_\_ date this document was signed. MAY 18, 2021 Effective date if applicable: (no 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 listed as the document's effective date on the Department of State's records. (CHECK ONE) Adoption of Amendment(s) ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. ■ 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 (voting group) Signature \_ (By a director, president or other officer - if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) ANNIA DOMINGUEZ (Typed or printed name of person signing) PRESIDENT (Title of person signing)