P20 000075489

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	OCALA LIQU	OR INC				
DOCUMENT NUMBER:	P20000075480					
The enclosed Articles of Amend	ment and fee are su	ubmitted for filing.	· · · · · · · · · · · · · · · · · · ·			
Please return all correspondence	concerning this ma	atter to the following:				
	DOMI	NIC JOHN				
		Name of Contact Perso	on			
	DJ&J AS	SOCIATES				
		Firm/ Company				
	230	0 SE 17TH ST, SUIT 200				
		Address				
		OCALA, FLORIDA 344	71			
		City/ State and Zip Coo	le			
	di ve	nad@yahoo.com				
E-ma		sed for future annual repor	t notification)			
For further information concerning		se call: at (³⁵²⁻⁶⁹⁴⁻²⁰	004			
Name of Contact	Person	Area Co	ode & Daytime Telephone Number			
Enclosed is a check for the follow	ving amount made					
	3.75 Filing Fee & tificate 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 Addre Amendment Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	Amend Division The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assec, FL 32303			

Articles of Amendment to Articles of Incorporation of

OCALA LIQUOR INC

(Name of Corporation as	currently filed with the Florids	Dept. of State)	
P20000075489			
(Document N	fumber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	ates, this <i>Florida Profit Corpora</i>	tion adopts the following ame	endment(s) to
A. If amending name, enter the new name of the corpora	ation:		
		The	new
name must be distinguishable and contain the word "corpora" Inc.," or Co.," or the designation "Corp." "Inc," or "chartered." "professional association," or the abbreviation	"Co". A professional corporal		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	<u></u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent	fice address in Florida, enter tl address:	ne name of the	
	Florida street address)		
New Registered Office Address:	(City)	, Florida(Zip Code)	
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f		gations of the position.	•
			21 .XJN
Signature o	of New Registered Agent, if chan	ging	-7
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.01	120 (11) (e), F.S.		21 JUN -7 AM BE 05

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 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	VP	SAMEER S NOORANI	5001 SW 41ST PL
X Add			OCALA, FL 34474
Remove			
2) Change		_	· · · · · · · · · · · · · · · · · · ·
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u></u>
Remove			
6) Change			
Add			
Remove			

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n amandmant provides ((au au a-aba					
n amendment provides i ovisions for implementir	ng the amen	ment if not con	toined in the	lation of issue	d shares.	
(if not applicable, indica	ate N/A)	inchi ii noi con	tamed in the s	inienament ju	seii:	
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The date of each amendment(s) addate this document was signed.	06/03/2021 option:	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file	
	(no more than 90 days after amendment file	date)
Note: If the date inserted in this blocument's effective date on the De	ock does not meet the applicable statutory filing require partment of State's records.	ements, 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 sh	nareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the fficient for approval.	e amendment(s)
	roved by the shareholders through voting groups. The followers through voting group entitled to vote separately on the amendation.	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
Dated 06/ Signature	3/2021	
Signature e	enade	
(By arti	rector, president or other officer – if directors or officers h l, by an incorporator – if in the hands of a receiver, trustee ed fiduciary by that fiduciary)	
	ZEENAT F KOTADYA	
	(Typed or printed name of person signing)	
	PRESIDENT	