(Red	questor's Name)	
(Ādo	dress)	
(Add	dress)	·*·-
(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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COVER LETTER

TO: Amendment Section
Division of Corporations

•

NAME OF CORPO	ORATION: VINO VERITAS I	MPORTS, INC.		
DOCUMENT NUN	P21000006205			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	atter to the following:		
	David Hewan			
		Name of Contact Person		
	VVI Services, Inc.			
		Firm/ Company		
	8846 MISSISSIPPI RUN			
		Address	***************************************	
	WEEKI WACHEE, FL 3461	3		
		City/ State and Zip Code)	
	david@cellar2sellers.com			
	•	sed for future annual report	notification)	
For further informati	on concerning this matter, plea	se call:		
David Hewan		929 at (de & Daytime Telephone Number	
Name	of Contact Person	Area Coo	le & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
S35 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)	
At	ailing Address nendment Section vision of Corporations	Amend	Address ment Section n of Corporations	
	O. Box 6327	The Centre of Tallahassee		
Ta	Hahassee, FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

VINO VERITAS IMPORTS, INC.	
(Name of Corporation as c	urrently filed with the Florida Dept. of State)
P21000006205	
(Document Nu	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statut its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corpora	tion:
VVI SERVICES, INC.	The new
	ion," "company," or "incorporated" or the abbreviation "Corp.," Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8846 MISSISSIPPI RUN
	WEEKI WACHEE, FL 34613
	· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office a	
Name of New Registered Agent	
- (FI	orida street address)
New Registered Office Address:	, Florida
· · · · · · · · · · · · · · · · · · ·	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	
Signature o	f New Registered Agent, if changing
Check if applicable The amendment(s) is/are being filed pursuant to s. 607.01.	
The amendment(s) is are being fried pursuant to \$, 007.01.	20 (11) (CR 1.3.

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	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	r adding additional Ar nal sheets, if necessary).	. (Be specific)				
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				_		
						
						_
						
				 -		
					·	
						
•	ent provides for an exc	change, reclassif	ication, or cance	ellation of issued	l shares,	
an amending	r implementing the am olicable, indicate N/A)	endment if not o	contained in the	amendment itse	<u>elf:</u>	
pro <u>visions for</u>	meane, materie war					
pro <u>visions for</u>						
pro <u>visions for</u>						
pro <u>visions for</u>				_		
pro <u>visions for</u>						
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pro <u>visions for</u>						
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provisions for						
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The date of each amendment(s) adoption:	if other than th
8/1/2024	
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, thi document's effective date on the Department of State's records.	s date will not be listed as th
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	action and shareholder
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement be separately provided for each voting group entitled to vote separately on the amendment(s):	tement
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
7/17/2024 Dated	
Signature	·
(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
David Hewan	
(Typed or printed name of person signing)	
President	

(Title of person signing)

COVER LETTER

TO: Amendment Section
Division of Corporations

:

NAME OF CORPOR	RATION: VINO VERITAS I	MPORTS, INC.		
DOCUMENT NUME	P21000006205		<u> </u>	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	David Hewan			
		Name of Contact Person	-	
	VVI Services, Inc.			
		Firm/ Company		
	8846 MISSISSIPPI RUN			
		Address	 	
	WEEKI WACHEE, FL 3461.	3		
		City/ State and Zip Code		
	david@cellar2sellers.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	ca call:		
Tor further unformation	redicerning this matter, preas	se can.		
David Hewan		at (442-8184	
Name o	of Contact Person	at (929) 442-8184 Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:	
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327	Amende Division The Ce	Address ment Section n of Corporations entre of Tallahassee	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

VINO VERITAS IMPORTS, INC.

VINO VERTAS IMI ORTS, INC.	
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P21000006205	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
VVI SERVICES, INC.	The new
name must be distinguishable and contain the word "corporation." "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp" A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8846 MISSISSIPPI RUN
	WEEKI WACHEE, FL 34613
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address Name of New Registered Agent	
(Florida si	treei address)
New Pagistarad Office Address	Cl
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New 1	Registered Agent, if changing
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)

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>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change	<u> </u>		
Add			
Remove 3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Add			
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			<u>_</u>			
f an amendment provides for an exchang	e, reclassific	ation, or c	ancellation	n of issued s	hares,	
provisions for implementing the amendm (if not applicable, indicate N/A)	nent if not co	ntained ir	the amen	<u>dment itself</u>	<u>:</u>	
					 .	· . - -
				<u>.</u> .	<u>.</u>	
	-					

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	11/2024	
Effective date <u>if applicable</u> : _	/1/2024	
	(no more than 90 days after amendment file da	ie)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requiremed Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without share	eholder action and shareholder
■ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the a sufficient for approval.	unendment(s)
	approved by the shareholders through voting groups. The follow for each voting group entitled to vote separately on the amenda	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
7/17/20: Dated Signature	24	
(Bý sele	a director, president or other officer – if directors or officers have cted, by an incorporator – if in the hands of a receiver, trustee, cointed fiduciary by that fiduciary)	
	David Hewan	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

. . .