

P22 000 042 145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

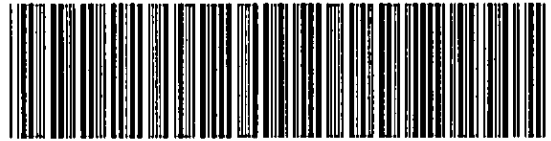
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08/13/22--01010--023 **35.00

FILED
SECRETARY OF STATE
DEPT. OF CORPORATIONS
2022 SEP 13 PM 12:09

JOHN R. DENNIS

DEC 15 2022

ANTHONY & PARTNERS
ATTORNEYS AT LAW

DIRECT: 813-273-5609

LLAFALCE@ANTHONYANDPARTNERS.COM

FRANK A. LAFALCE, ESQUIRE

100 South Ashley Drive

SUITE 1600

TAMPA, FL 33602

OFFICE: 813-273-5616

FAX: 813-221-4113

ANTHONYANDPARTNERS.COM

September 12, 2022

VIA FED EX - 777910214225

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: Kinnitty Spirits North America Inc.

Document Number: P22000042145

Our File Number: 201098.01

Dear Sir or Madam:

Enclosed please find our firm's Check No. 24418 in the amount of \$35.00. This check represents payment for the filing fee of the enclosed Articles of Amendment of the corporation referenced above.

Please do not hesitate to contact our office should you have any questions or concerns.

Very truly yours,

Cristal San Luis

Cristal San Luis
Legal Assistant to Frank Lafalce, Esq.

Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: KINNITTITY SPIRITS NORTH AMERICA INC.

DOCUMENT NUMBER: P22000042145

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Frank Lafalce

Name of Contact Person

Anthony & Partners LLC

Firm/ Company

100 S. Ashley Drive Ste 1600

Address

Tampa Fl. 33602

City/ State and Zip Code

flafalce@anthonyandpartners.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Contact Person _____ at (813) _____ 273-5616
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

KINNETTY SPIRITS NORTH AMERICA INC.

P22000042145

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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:

☒ Change PT John Doe

☐ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	<u>CT</u>	<u>Colin Breen</u>	<u>802 N 12th Street</u>
<input type="checkbox"/> Add			<u>Tampa, FL 33602</u>
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>PS</u>	<u>Bryan Bean</u>	<u>802 N 12th Street</u>
<input checked="" type="checkbox"/> Add			<u>Tampa FL 33602</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

The number of shares the corporation is authorized to issue is hereby increased to 10,000

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

NA

September 8, 2022

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

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.


Adoption of Amendment(s) (CHECK ONE)

- ☐ 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 cast 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

by _____."
(voting group)

September 9, 2022
Dated _____

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)

Colin Breen

(Typed or printed name of person signing)

CEO

(Title of person signing)