

PG5000074321

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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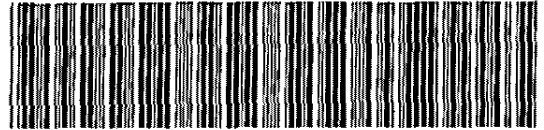
(Business Entity Name)

(Document Number)

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04 MAY 27 AM 10:19
CLERK OF STATE
TALLAHASSEE, FLORIDA

Ps 6/2/04
Amend

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NEW OFFICERS /DIRECTORS

DOCUMENT NUMBER: P95000074321

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

Please return all correspondence concerning this matter to the following:

LISSET ROMAN

(Name of Person)

R&D LIQUORS INC

(Name of Firm/ Company)

4410 W 16 AV #7

(Address)

HIALEAH, FL. 33012

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

LISSET ROMAN

(Name of Person)

at ()

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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
409 E. Gaines Street
Tallahassee, FL 32399

FILED

Articles of Amendment
to
Articles of Incorporation
of

04 MAY 27 AM 10:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R & D LIQUORS CORP.

(Name of corporation as currently filed with the Florida Dept. of State)

P 95000074321

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

- THE NEW REGISTERED AGENT SHALL BE.

LISSET ROMAN.

7851 NW 159TH MIAMI LAKES FL 33016.

- THE NEW OFFICERS/DIRECTORS SHALL BE:

LISSET ROMAN 7851 NW 159TH MIAMI LAKES FL 33016 (P) (S)
ANNIA CASTELLANO 270 E 4ST #5 HIALEAH FL 33010 (V.P) (T)

(Attach additional pages if necessary)

If an amendment provides for 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)

(continued)

The date of each amendment(s) adoption: 5/19/04.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

☒ The amendment(s) was/were approved 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)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 19 day of MAY, 2004.

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)

LISSET ROMAN.
(Typed or printed name of person signing)

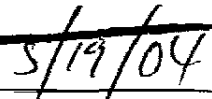
PRESIDENT.
(Title of person signing)

FILING FEE: \$35

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the articles, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



Signature



Date