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(A	ddress)	
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(C	ity/State/Zip/Phone	e #)
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(D	ocument Number)	
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FIN SEP -3 PM 3: 17

COVER LETTER ...

Division of	n Section Corporations		
SUBJECT:	Bee Coffee, LL	C	
SOMMET.	Name of Li	mited Liability Company	
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corre	spondence concerning this matte	r to the following:	
	- Paola	Alejandra Mo	willo Auvert
	Bee	e Coffee,	LLC
		Firm/Company	
	18823_U	LMUS ST	
		Address	
	LUTZ FL	33558	
		 City/State and Zip Code 	:
	E-mail address: (26@ Hotmail to be used for future annual	report notification)
For further information	n concerning this matter, please c	all:	
Paola	A. Morillo A.	at (_ 813)	685-7639
Name	c of Person	Area Code	Daytime Telephone Number
Enclosed is a check for	the following amount:		
X \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is en	Certificate of Status &
Mailing Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 327	Divisio The Ce 2415 N	ddress: ration Section on of Corporations ration of Tallahassee 1. Monroe Street, Suite 810 ussee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

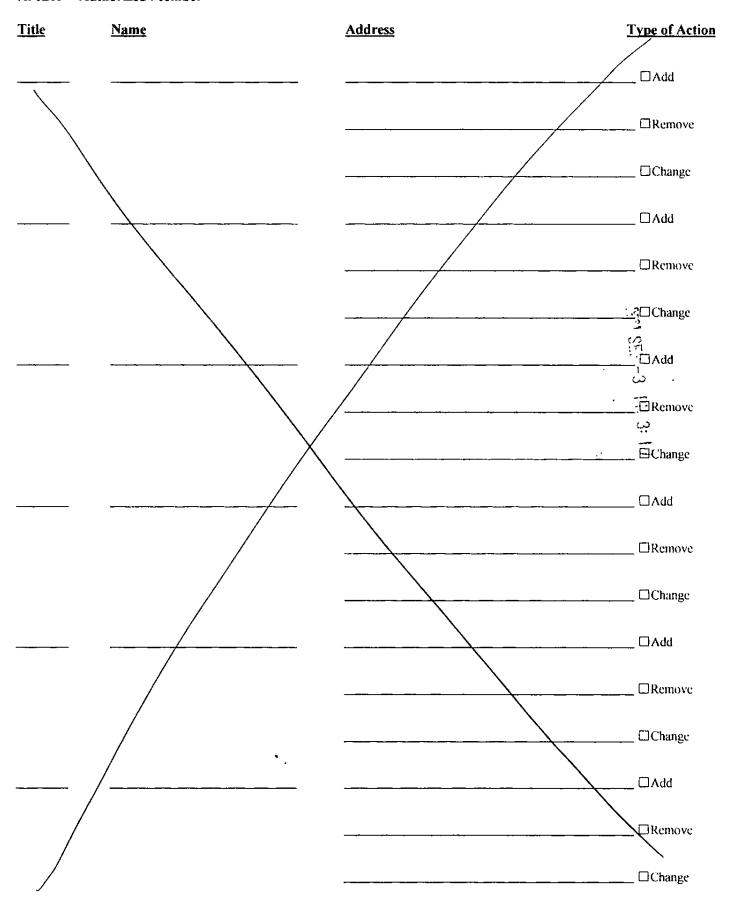
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records. Liability Company))
The Articles of Organization for this Limited Liability Company	y were filed on	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	/	
	/	, CD
		ω.
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		့်ယ္
	\	<u> </u>
		,
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter th	he name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	ida i
/	City	idaZip Code

New Registered Agent's Signature, if changing Registered Agent:

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member



D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
we "Julio Cesar Martinez Rincon and
Paola Alejandra Movillo Auvert". Owners OF "BEE
COFFEE, LLC" would like to change our
current management structure of our company
From our titles of "MGR" To a
MEMBER "MBR", Our company will be
managed by 15" members of the company.
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E. Effective date, if other than the date of filing: 08/13/2021 (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(1) 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.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated 08/29/2021
Signature of a member of authorized representative of a member Paola Alexandra Morillo Auvert Type for printed name of signer