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## **COVER LETTER**

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	Name of Li	mited Liability	Company				
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MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

## STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

- · · · · · · · · · · · · · · · · · · ·	ti22 LLC					
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)						
The Articles of Organization for this Limited Liability Comp Florida document number	any were filed on 8. 9-10 and assigned					
This amendment is submitted to amend the following:	ZNIZ SEP -7 SECRETAR) TALL AHASSI					
A. If amending name, enter the new name of the limited liability company here:  Sobe Fizz Pure Products LLC = 3						
The new name must be distinguishable and end with the words "I" "L.L.C."	Limited Liability Company," the designation "LLG for the abbreviation					
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET ADDRESS	1642 Fletcher St Hollywood, Fl 33020					
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	Sobe Fizz Pure Products L(C Box 3015 HallAndale, F1 33008					
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:						
Name of New Registered Agent:	Sophia Grayio 164a Fletchen Sta					
New Registered Office Address:	1642 Flet Chen St.  Enter Florida street address					
<u> </u>	City , Florida 33020 Zip 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Type of Action** Title **Address** Name ☐ Add Remove ☐ Add Remove ☐ Add Remove ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ZHIZ SEP-7 PH 3: 02

SECRETARY OF SHATE HAID CO Dated Signature of a member or authorized representative of a member Suphia GRicio
Typed or printed name of signee

Page 2 of 2

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