

L14000041752

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

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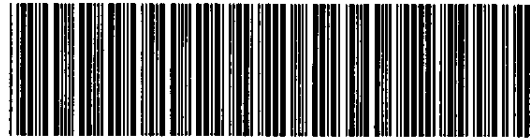
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MAY 16 2014  
CLERK OF COURT

2014 MAY 16 AM 9:58

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## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: **BHS Brewing LLC**  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Brent Gordon, Esq.**

Name of Person

**The Gordon Law Firm | P.A.**

Firm/Company

**PO Box 10338**

Address

**Tampa, Florida 3367**

City/State and Zip Code

**bg@thegordonfirm.com**

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

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TALLAHASSEE, FL

For further information concerning this matter, please call:

**Brent Gordon** at **813 641-4440**  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|--|--|--|

**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**

**BHS Brewing 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 Company were filed on 3/12/2014 and assigned Florida document number L14000041752.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

**(Principal office address MUST BE A STREET ADDRESS)**

806 NW 16th Avenue

Gainesville, Florida 32601

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

PO Box 6188

Gainesville, Florida 32627-6188

**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:

The Flagg Firm, P.L.

New Registered Office Address:

806 NW 16th Avenue

Enter Florida street address

Gainesville

Florida 32601

City

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 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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Patrick Burger	PO Box 6188	<input checked="" type="checkbox"/> Add
		Gainesville, Florida 32627-6188	<input type="checkbox"/> Remove
MGR	Gary Heil	PO Box 6188	<input checked="" type="checkbox"/> Add
		Gainesville, Florida 32627-6188	<input type="checkbox"/> Remove
MGR	Peter Simms	PO BOX 6188	<input checked="" type="checkbox"/> Add
		Gainesville, Florida 32627-6188	<input type="checkbox"/> Remove
MGR	Patrick C. Burger	703 NW 12th Avenue	<input type="checkbox"/> Add
		Gainesville, Florida 32601	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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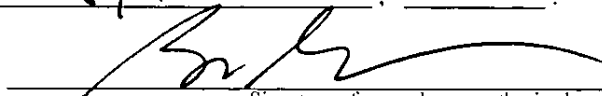
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 5/14, 2014



Signature of a member or authorized representative of a member

**Brent Gordon**

Typed or printed name of signee

FILED  
MAY 16 2014  
CLERK OF COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE SEVENTH JUDICIAL CIRCUIT  
IN FLORIDA  
TALLAHASSEE, FLORIDA

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