## L15 000009268

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(business Entity Name)
(Document Number)
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## **COVER LETTER**

Division of Co	rporations		
eudieze.	King Fox Brewery, LLC		·
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Regina L. Diaz		
		Name of Person	<del></del>
	King Fox Brewery, LLC		
		Firm/Company	
	818 West 73rd Place		
		Address	
	Hialeah, Fl 33014		
		City/State and Zip Code	
	gina@kingfoxbeer.com		
	E-mail address: (	to be used for future annual report notific	cation)
For further information	concerning this matter, please ca	all:	
Regina Diaz		786 614-7609 at ()	
Name	of Person	at () Area Code Daytime '	l'elephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

KING FOX BREWERY, 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 1/15/2015 and assigned Florida document number L15000009268 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LAC" or the abbreviation "LA.C." 6520 West 20th Avenue, Unit #1 Enter new principal offices address, if applicable: Hialcah, Fl 33012 (Principal office address MUST BE A STREET ADDRESS) 818 West 73rd Place Enter new mailing address, if applicable: Hialeah, Fl 33014 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name 30 registered agent and/or the new registered office address here: N/A Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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.

Ciiv

If Changing Registered Agent, Signature of New Registered Agent

. Florida

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Stephanie M. Cortina	2710 West 60th Place Apt 104 Hialeah .FL 33016	= Add
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Filing Fee: \$25.00