# L15000111420

(Red	questor's Name)	
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# **COVER LETTER**

SUBJECT:		d Parent Company LLC		
object.	· · ·	Name of Lim	ited Liability Company	<del></del>
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Angela Brack		
			Name of Person	·
		Really Good Beer Stop		
		· ·	Firm/Company	
		323 10th Ave North		
			Address	
		Jacksonville Beach, Fl 322	50	
			City/State and Zip Code	
		- '-		
		E-mail address: (	to be used for future annual report notifi	ication)
For further is	nformation c	oncerning this matter, please ca	all:	
Angie Brack	Name of Person  Really Good Beer Stop  Firm/Company  323 10th Ave North  Address  Jacksonville Beach, Fl 32250  City/State and Zip Code angic@reallygoodbeerstop.com E-mail address: (to be used for future annual report notification)  ther information concerning this matter, please call:  Brack  40.4 808-5509 at (			
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a	a check for th	e following amount:		
□ \$25.00 F	Filing Fee		Certified Copy	Certificate of Status &

### MAILING ADDRESS:

TO:

**Registration Section Division of Corporations** 

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

Really Good Parent Company 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  $\frac{7/01/2015}{}$ and assigned Florida document number L15000111420 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 contain the words "Limited Liability Company," the designation "LI.C" or the abbreviation "LI.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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 of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address ., Florida \_\_\_ City

#### 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 Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action	
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Typed or printed name of signee

Filing Fee: \$25.00