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STATE OF ARIZONA  
DIVISION OF CORPORATE AFFAIRS

JAN 25 2023  
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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Grassroots Kava House, 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:

Sean G. Suits  
Name of Person

Grassroots Kava House, LLC  
Firm/Company

957 Central Ave  
Address

St. Petersburg, FL 33705  
City/State and Zip Code

Sean@grassrootskavahouse.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Trudy A Taylor CPA at ( 727 ) 861-8632  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |   |  |  |
|--|---|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input checked="" 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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Grassroots Kava House, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED IN THE OFFICE OF THE CLERK OF THE  
SUPREME COURT OF THE STATE OF FLORIDA  
19 DEC 23 AM 9:25

The Articles of Organization for this Limited Liability Company were filed on October 19, 2015 and assigned  
Florida document number L15000177450.

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 "LLC" or the abbreviation "L.L.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:

451 29th Ave N.

Enter Florida street address

St Petersburg

City

Florida

33704

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 attending 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>	<u>Address</u>	<u>Type of Action</u>
MGR AMBR	Sean G. Suits	451 29 <sup>th</sup> Ave N.	<input type="checkbox"/> Add
		St. Petersburg, FL 33704	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR AMBR	Kenneth Hoyumpa	4618 36 <sup>th</sup> Ave N.	<input checked="" type="checkbox"/> Add
		St. Petersburg, FL 33713	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR AMBR	Jeff Connelly	2429 15 <sup>th</sup> Ave N.	<input checked="" type="checkbox"/> Add
		St. Petersburg, FL 33713	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR AMBR	Ryan Cavanaugh	2829 Dartmouth Ave N.	<input checked="" type="checkbox"/> Add
		St. Petersburg, FL 33713	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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**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.

Dated December 19, 2019

Sean G. Suits

**Filing Fee: \$25.00**