L15000188714

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TALLAHASSEE FLOATS

COVER LETTER

Division of Corporations					
SUBJECT: Two	Brothers Ho	ps LLC			
	Name of Limil	led Liability Company			
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing			
Please return all correspo	ndence concerning this matter t	o the following:			
	Eric D.	Reynolds Name of Person			
		Firm/Company			
	N7363 P-	tarmigan Dr. Address			
	Pardeeville	City/State and Zip Code City/State and Zip Code Decreased for future annual report notifications City 10 ld 5 / G / G / G / G / G / G / G / G / G /			
	eric davic E-mail address: (to	be used for future annual report notific	acil com		
For further information co	oncerning this matter, please ca	n:			
Eric D. Name of	Reynolds Person	at 1 727 1 560 Area Code Daytime	204 - 2411 e Telephone Number		
Enclosed is a check for the	ne 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)		

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

Street Address:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TWO Brothers Hops (Name of the Limited Liability Comp (A Florida Limited)	LLC pany as it now appears on our record. Liability Company)					
The Articles of Organization for this Limited Liability Company Florida document number <u>L150C0188714</u> .	1					
This amendment is submitted to amend the following						
A. If amending name, enter the new name of the limited liab A & E Outdoors LLC The new name must be distinguishable and contain the words "Limited Liab						
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	208 Millstone 3 5 11 Palm Harbor, FAR & 3					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N7363 Ptarmiga & Sur Pardeeville, WT 33,54					
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: 208	D. Reynobls Millstone Dr Enter Florida street address					
<u>Palm</u>	Harbor Florida 34683 Zip Cook					

New Registered Agent's Signature, if changing Registered Agent:

I nereby 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.

f Changing Registered Agent, Signature of New Registered Agent

Page 2 of 3

). If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Note	effective date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Date	09/13/2023
	Signature of a member or authorized representative of a member
	Eric D. Reynolds Typed or printed name of signee

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>	Name	Address	Type of Action
MOR	Enc O Reynolds	N7363 Ptarmigan Oc	DAdd
		Pardeeville, WI 53954	
			⁄⊠Change
MGR	Angelina A. Reynolds	N7363 Ptarmigan Pr.	p ⊻vqq
		Pardeeville, WI 53954	
			≰ Change
			□Add
			□Remove
			□Change
			JAdd
			□Remove
		-	□Add
			= Remove
			□Change
			□Remove

....Change