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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL.
(Bu	isiness Entity Name)	
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
	<u>. </u>	





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MAR 01 2016 S. YOUNG

COVER LETTER

TO: Registration Security Division of Con				
SUBJECT:	River Roast (Coffee LLC ited Liability Company	. 	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Andrew	Name of Person		
	River	Roast Coffee LLC Firm/Company		TALLAN TALLAN
	4728	Northfield Pl Address		EB 29 P
	Land o L	akes, FL 34639 City/State and Zip Code		PM 5: 51
		ng @ gmail .com to be used for future annual report notific		ブ
For further information of	concerning this matter, please c	all:		
Andrew Name o	v Fielding of Person	at (813) 732 - Area Code Daytime	9519 Telephone Number	
Enclosed is a check for t	he 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 State Certified Copy (additional copy is encl	
	ING ADDRESS: ration Section	STREET/COURIE Registration Section		

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

River Roast Coffee 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 onand assigned	
Florida document number <u>L16000031367</u>	
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 "LLC",	 .
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	!~ }
	131 2.C.
ابن جي الله الله الله الله الله الله الله الل	S (A)
(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 th registered agent and/or the new registered office address here:	e ne
registered agent and/or the new registered office address here.	
Name of New Registered Agent:	
New Registered Office Address:	
Enter Floridu street address	_
, Florida	
City Zip Code New Registered Agent's Signature, if changing Registered Agent:	
the Negistered Agent's Signature, it changing Registered Agent: I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply wi	th th

If Changing Registered Agent, Signature of New Registered Agent

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 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** 4728 Northfield Pl Land o Lakes, FL 34639 MAdd Andrew Fielding MGR ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add □ Remove _□ Change □ Add □ Remove ☐ Change _□ Add □ Remove

☐ Change

II 2	amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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(If an No	fective date, if other than the date of filing:	.0207 ed as
he T	record specifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the earlief the filed.	er of
Dat	ted <u>February</u> 22, 2016.	
	As to	
	Signature of a member or authorized representative of a member	
	Andrew Fielding Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00