## L16000139472

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## **COVER LETTER**

Tallahassee, FL 32314

TO: Registration Se Division of Cor				
43 5 4 85 A 45 A 45 A 45 A	Beach Brewing LLC		•	
SUBJECT:	Name of Limited 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:		
	Fran Andrewlevich			
		Name of Person	<del> </del>	
	West Palm Beach Brewing	, LLC	•	
		Firm/Company	120	
•	1500 Elizabeth Ave			
	<del></del>	Address	· · · · · · · · · · · · · · · · · · ·	
	West Paim Beach, FL 334	01		
		City/State and Zip Code		
	franandrewlevich@hotmail.			
	E-mail address: (	to be used for future annual report not	ification)	
For further information of	concerning this matter, please co	ali:	,	
Fran Andrewlevich		561-818-83	85	
Name o	of Person	at () Area Code Daytin	ne 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)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addre		Street Address: Registration So	ection	
Registration Division of 0		Division of Co	rporations	
P.O. Box 633	•	The Centre of		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

West Palm Brewing LLC

(Name of the Limited Liability Comp) (A Florida Limited)	my as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L16000139472	were filed on 07/27/2016 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1500 Elizabeth Ave
(Principal office address MUST BE A STREET ADDRESS)	West Palm Beach, FL 33401
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1500 Elizabeth Avc West Palm Beach, FL 33401
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registere</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	i

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, 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
MGR	Webster, Matthew	287 S US Highway One	□Add
		Tequesta, FL 33469	<b>≣</b> Remove
			□Change
MGR	Fran Andrewlevich	1500 Elizabeth Ave	■Add
		West Palm Beach, FL 33401	□ Remove
			■ Change
			□ Add
			Remove
			Change
			□Add
	·		Change
			□ Add
			□Remove
			□ Change
			□ Add
			□Remove
			☐ Change

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Effect	ive date, if other than the date of filing:  (optional)  ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020
Note:	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ent's effective date on the Department of State's records.
e recor ord is fi	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	Fr Shall
	Signature of a member or authorized representative of a member
	Fran Andrewlevich Typed or printed name of signee

Filing Fee: \$25.00