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(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:			
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## **COVER LETTER**

TO: Registra Division	ation Sec of Corp	ction porations	₩		
	nbucha I	Koach, LLC			
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed Art	icles of a	Amendment and fee(s) are sub-	mitted for filing.		
		ndence concerning this matter			
		Philip J. Stoddard			
			Name of Person		
			Firm/Company	· · · · · · · · · · · · · · · · · · ·	
		3364 13th Street			TALL SECTION
			Address		哥哥
		St. Augustine, Florida 320.	33		一篇
		phil@northstarpi.com	City/State and Zip Code		7 FEB -1 PH 4: 28
		E-mail address: (	to be used for future annual report notif	ication)	28
For further inform	nation co	oncerning this matter, please ca	all:		
Philip J. Stoddard	d		904 4608599 at ()		
	Name of	`Person	Area Code Daytime	Telephone Number	
Enclosed is a che	ck for th	e following amount:			
<b>■</b> \$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 enc	
	Registra Divisio P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COURI Registration Section Division of Corpora Clifton Building 2661 Executive Cer	n ations	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kombucha Koach, LLC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L17000012224	were filed on 1/19/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
D I Y Kombucha, LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		CR CR
		B 257
		—————————————————————————————————————
Enter new mailing address, if applicable:		नु निर्
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		- 13 70 70 70 70 70 70 70 70 70 70 70 70 70
		<b>⇔</b>
B. If amending the registered agent and/or registered o		ie name of the new
registered agent and/or the new registered office address her	<u>e</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	Florido	
<del>/</del>	City, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	•	•
		. 2
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and I am fai provided for in Chapter 605, F.S. Or, if	niliar with and this document is
	nging Registered Agent, Signature of New Regi	stered Agent

Page 1 of 3

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 **Type of Action Address** <u>Title</u> <u>Name</u> □ Add □ Remove ☐ Change \_□ Add ☐ Remove ☐ Change □ Remove ☐ Change... □ Add \_□ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove

☐ Change

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ffective date, if other than the dan effective date is listed, the date must bote: If the date inserted in this blococument's effective date on the Dep	k does not meet the applicable statutory fil	(optional) r more than 90 days after filing.) Pursuant to 605.03 ling requirements, this date will not be listed
e record specifies a delayed of The 90th day after the recor		e time, at 12:01 a.m. on the earlier
·		
ated January 30	. 2017	

Page 3 of 3

Filing Fee: \$25.00