L17 CCCO 37350

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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COVER LETTER

	istration Sec ision of Corp			
SUBJECT:		ers Brewery LLC		
SUBJECT	-	Name of Lim	ited Liability Company	
The enclosed	l Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		Michael Dees		
			Name of Person	
		Dees Brothers Brewery LL	.C	
			Firm/Company	
		611 San Juan Blvd		
			Address	
		Orlando, FL 32807		
			City/State and Zip Code	
		michael@deesbrosbrew.cor		• · · · · · · · · · · · · · · · · · · ·
For further is	nformation co	E-mail address: (oncerning this matter, please c	to be used for future annual report notif all:	ication)
Michael Dec	es .		407 257-5104 at ()	
***	Name of	Person	Area Code Daytime	: Telephone Number
Enclosed is a	a check for th	e following amount:		
□ \$25.00 I	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
34	:::		Samuel Addresses	

Mailing Address:

TO:

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

2020 J

Dees Brothers Brewery			The contract of the contract o
(Name of the Limite	d Liability Compa A Florida Limited	nny as it now appears on our records.) Liability Company)	3 1
The Articles of Organization for this Limited Lia Florida document number L17000037350	ability Company	were filed on February 16, 2017	and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
The new name must be distinguishable and contain the wo	ords "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		210 Magnolia Ave.	
(Principal office address MUST BE A STREE		Sanford, FL 32771	
Enter new mailing address, if applicable:		210 Magnolia Ave.	
(Mailing address MAY BE A POST OFFICE BOX)		Sanford, FL 32771	
B. If amending the registered agent and/or reagent and/or the new registered office address Name of New Registered Agent:		address on our records, <u>enter the</u>	name of the new registered
New Registered Office Address:	210 Magnolia /	Ave.	
rew registered office reduced.		Enter Florida street address	
	Sanford		la ³²⁷⁷¹
		City	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 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
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□ Change
			□Remove
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m effective date i ote: If the date	f other than the dat s listed, the date must be inserted in this block tive date on the Depar	specific and canno does not meet th	t be prior to date of t se applicable statu	iling or more than 90 d	_ (optional) ays after filing.) Pursuant to nts, this date will not be	o 605.0207 e listed as
record specifies is filed.	a delayed effective da	te, but not an ef	fective time, at 12:	01 a.m. on the earlie	er of: (b) The 90th day	after the
nted July 24		202	20			
	2/14					
	Mund	12 /				

Filing Fee: \$25.00

Typed or printed name of signee