L1700043475

(Requé	estor's Name)	
(Addre	ss)	<u>. </u>
(Addre	ss)	
(City/S	tate/Zip/Phor	e #)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Na	me)
(Docur	ment Number)
Certified Copies	Certificate	s of Status
Special Instructions to Fili	ng Officer.	

Office Use Only



400300267164

06/22/17--01035--106 **25.50

2017 JUN 22 PM 2: 05

K. SALY JUN 26 2017

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2017 ED
2017 JUN 22 PM 2: 05
ALLAHASITOLSIA
ALLAHASIKY DI ST.

RUDY'S BEER A	AND MORE ELC	TALLARIARY DI
(Name of the Limited (A	Liability Company as it now appears on our Florida Limited Liability Company)	TALLAHASSEE, FLORIO
The Articles of Organization for this Limited Liab Florida document number <u>4/70000436</u>	ility Company were filed on <u>02</u> / ₂	23/17 and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	ne limited liability company here:	
The new name must be distinguishable and contain the word	ls "Limited Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET).	ADDRESS)	
Enter new mailing address, if applicable:		 -
*		
(Mailing address MAY BE A POST OFFICE BC	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered offic		ecords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	t address
		, Florida
	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 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>Name</u>	Address	Type of Action
Milton R Moreno	8622 Avonshire St. Orlando Fl	□ Add
		■ Remove
		Change
Rudolph Nunez	8622 Avenshine St Orlando FI	Add
	32817	☑ Remove
		🗆 Change
Michael A Nonez	SOZZ kvonshire St Crlando F1	
	32817	■ Remove
		Change
		🗖 Add
		Remove 2011 dange
		Change Change
		☐ Remove
	Milton R Moreno Rudolph Nunez	Milton R Moreno 8622 Avenshire St. Orlando Fl 8622 Avenshire St. Orlando Fl 8622 Avenshire St. Orlando Fl 32817 Michael A Nonez 8622 Avenshire St. Orlando Fl 32817

	·
	1 JUN 72
	70 70 70 70 70 70 70 70 70 70 70 70 70 7
	and the second of the second o
•	
,	
	2/20/2017
	tive date, if other than the date of filing: 3/29/2017 (optional)
ote:	fective 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 605,0207. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as it.
ocun	nent's effective date on the Department of State's records.
re The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
احدادة	3/29/2017 4:29 PM
ated	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00