L170000 645 50

(Requestor's Name)			
(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:			

Office Use Only



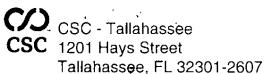
200419949462

2024 JAH 10 PH 1:59 SECRETARY SESSION TALLARIA SESSION

2024 JAN 10 AMII: 36

RECEIVED

13



850-558-1500, Ext. 61592

To: Department Of State, Division Of Corporations

From: Alexxis Weiland-Sorenson

Ext: 61592 Date: 01/10/24 Order #: 1384187-1 Re: Fun Beer LLC

Processing Method: In-House

TO WHOM IT MAY CONCERN:

Enclosed please find:-

Application for Certificate of Authority

Amount to be deducted from our State Account; \$25,00;- FL State Account Number

12000000195 Authorization:

Please take the following action:
File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

(2)		(b)
2. (d)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	227 Brazilian Avenue	227 Brazilian Avenue
	Palm Beach, FL 33480	Palm Beach, FL 33480
	3/22/2017	L17000064550
	Date of filing/registration in Florida	4. Document number
(a)		
(4)	Registered Agent and Registered Office shown on the records o	of the Florida Dept. of State:
	File Florida Co.	
	Registered Office Address (MUST BE FLORIDA STREET	TADDRESS)
	7000 W. Palmetto Park, Suite 210	ALL TA
	Boca Raton , F	SECRETARY SECRETARY SECRETARY
	7	රෝල 😇 🧎
(b)		111 (1) * *****************************
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	ed Office address:
	Victoria Donaldson	
	NEW Registered Office Address:	
	227 Brazilian Avenue	- 10
	Palm Beach	33480
		<u> </u>
ange ent w s/we	or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited li- re authorized by an affirmative vote of the members.	aws of the State of Florida, it is hereby confirmed that after the registered office and the business office of the registered liability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in
artic 7	cles of organization or the operating agreement of the	
ienati	ure of a member or authorized representative of a member	Victoria Donaldson Printed or typed name of signee
ereb	v accept the appointment as registered agent and ag	gree to act in this capacity. I further agree to comply with the e performance of my duties, and I am familiar with and accep ed for in Chapter 605, F.S. Or, if this document is being filed hereby confirm that the limited liability company has been