

L17000145154

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

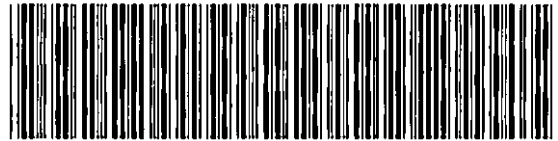
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF
TALLAHASSEE, FL

2022 NOV 21 AM 8:44

FILED

11-21-22-01002-010 **25.00

2022 NOV 21 PM 4:22

GRAYROBINSON

Ashley Sadler | Ashley.Sadler@gray-robinson.com | D 850.577.6956
301 South Bronough Street, Suite 600, Tallahassee, Florida 32301 | T 850.577.9090 | F 850.577.3311

November 21, 2022

VIA HAND DELIVERY

Registration Section
Division of Corporations
2415 N. Monroe St., Ste. 810
Tallahassee, Florida 32303

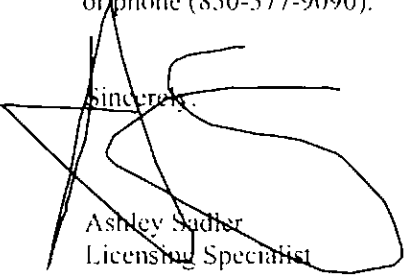
Re: Wynwood Brewing Company LLC
One Busch Place
St. Louis, MO 63118

Dear Sir or Madam:

Enclosed please find Articles of Amendment to Articles of Organization and a check, payable to Florida Department of State Registration Section, in the amount of \$25.00 for the above listed entity.

Please contact me, directly, if you have any questions. I can be reached via e-mail (Ashley.sadler@gray-robinson.com) or phone (850-577-9090).

Sincerely,



Ashley Sadler
Licensing Specialist

AS/aws
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wynwood Brewing Company LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ashley Sadler, Licensing Specialist

Name of Person

GrayRobinson, P.A.

Firm/Company

301 S. Bronough St., Ste. 600

Address

Tallahassee, Florida 32301

City/State and Zip Code

ashley.sadler@gray-robinson.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ashley Sadler

Name of Person

at (850)

Area Code

577-9090

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$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 Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

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

FILED

2022 NOV 21 AM 8:44

Wynwood Brewing Company LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 7/6/2017 and assigned
Florida document number L17000145154.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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 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>	<u>Address</u>	<u>Type of Action</u>
Secretary, Manager	Thomas Larson	One Busch Place	<input type="checkbox"/> Add
		St. Louis, MO 63118	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Vice President, Treasurer	Matt Gilbertson	125 W 24th Street	<input type="checkbox"/> Add
		New York, NY 10011	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Assistant Secretary	Erika Cohn	One Busch Place	<input checked="" type="checkbox"/> Add
		St. Louis, MO 63118	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Secretary	James Mathis	One Busch Place	<input checked="" type="checkbox"/> Add
		St. Louis, MO 63118	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Assistant Secretary	Kenneth Judd	One Busch Place	<input checked="" type="checkbox"/> Add
		St. Louis, MO 63118	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Vice President	Daniel Preston	One Busch Place	<input checked="" type="checkbox"/> Add
		St. Louis, MO 63118	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2027 NOV 21 AM 8:44
SECURITY DIVISION
TALLAHASSEE, FL

2022 NOV 21 AM 8:44
SECURITY DIVISION
TALLAHASSEE, FL

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(If an effective 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 (3)(b)

If the record 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 record is filed.

Dated November 8, 2022

Yolanda A. Shenas
Signature of a member or authorize

Signature of a member or authorized representative of a member

Hydia A. Thomas
Typed or printed name

Typed or printed name of signer

Filing Fee: \$25.00