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(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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## **COVER LETTER**

SUBJECT: Patriot's Charce Coffee Co. LLC Name of Limited Liability Company					
	· · = · · · · · · · · · · · · · · · · ·				
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please return all correspon	dence concerning this matter	to the following:			
	Jan	Name of Person			
Patriot's Choice Coffee Colle					
8310 Country Creek Blud					
City/State and Zip Code					
E-mail address: (to be fixed for future annual report notification)					
For further information concerning this matter, please call:					
Jim J.	mes) Davis	at ( <u>G X/)</u> 444 Area Code Daytim	<u>-723/</u>		
Name of	Person	Area Code Daytim	e 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:

ŢO:

Registration Section Division of Corporations

> Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

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Patriot's Choice	any as It now appears on our records.
(Name of the Limited Liability Comp (A Florida Limited	Liability Company)
The Articles of Organization for this Limited Liability Company	y were filed on August 31, 2017 and assigned
Florida document number <u>417000163021</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	ffee Com Ray LLC
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N1.4
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	N/4
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he	office address on our records, <u>enter the name of the new</u> re:
Name of New Registered Agent: 1/1	
New Registered Office Address:	Enter Florida street address
	enter r toriaa street adaress
	, Florida

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending or removed	Authorized Person(s) from our records:	authorized t	o mana	ge, enter the	title, name, a	nd address of each	person being added	
MGR = Manager AMBR = Authorized Member				2017 AL	nd address of each  LEL  G14 PM 4: 32	-EL		
<u>Title</u>	<u>Name</u>			Address	PALLAH	16	Type of Action	
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Filing Fee: \$25.00