L19000018750

(Requestor's Name)		
(Address)	400324	1263774
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)	02/11/13-	-01040010 +*30.00
(Document Number)		
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COVER LETTER

TO: Registration Solution of Col			_
SUBJECT:	ESSENTIAL	- BEVERAGE	= GROUP & LLC
	Name of this	кей главниу Сонграну	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	<u>5US</u>	AN H.HEL	TER
		Firm/Company	
	_8273 H	• •	ub DRIVE h FL 33412
	West		h FL 33412
	SHHE E-mail address: (City/State and Zip Code LTER 6 A C to be used for future annual report notif	DL. COM
For further information c	concerning this matter, please ca	ıll:	
Susant	H. Helter	at (978 85	3-7526 Telephone Number
		mea code Daynine	retephone removes
Enclosed is a check for the	he 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/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ESSENTIAL BEVERAGE GROUP LLC

The Articles of Organization for this Limited Liability Company	were filed on JA	N 162	2019 and assigned
Florida document number <u>L190006 187</u> 50			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here	:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the desig	gnation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:			5: 6
(Principal office address MUST BE A STREET ADDRESS)			E S
			PH
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ur records, <u>en</u>	ter the name of the ne
Name of New Registered Agent:	\		
New Registered Office Address:	Enter Florida	street àddress	
	City	, Florida	Zip Code
Nam Desistand Asset's Cinneture if showning Desistand Assets			
New Registered Agent's Signature, if changing Registered Agent:		pacity. I further	agree to comply with th

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

Title	Name	Address	Type of Action
<u>u 62</u>	MARK OLDHAM	13012 Summerlake	🗆 Add
		Way	Remove
		CIEIMOIII FL	Change
		34711	
			□ Remove
			Change
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(If an effective date is listed, the date Note: If the date inserted in the	the date of filing: e must be specific and cannot be prior to d is block does not meet the applicable the Department of State's records.	ate of filing or more than 90 days after	filing.) Pursuant to 605.0207 (3)
the record specifies a dela) The 90th day after the	ayed effective date, but not a record is filed.	n effective time, at 12:01 a	i.m. on the earlier of:
Dated FEB	7 2010)	
	Signature of a trember or authorize	d representative of a member	

Page 3 of 3

Filing Fee: \$25.00