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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

Enter the email address for this business entity to be used for future യാര് annual report mailings. Enter only one email address please.

Email 1	Address:		
CING Y T		 	

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Help T. LEMIEUX MAY 0 9 2023 To: 18506176383 From: 14693173436 Date: 05/05/23 Time: 9:49 PM Page: 02/04

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

(((H23000168998 3))) **OF**

(Name of the Limited Liability Company as it now appears on our	r records.)
(Name of the Limited Liability Company as it now appears on our (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on $\frac{01/98/2020}{1}$	0 and assigned
Florida document number 1,20000015753	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
AWYNWOODILC	
The new name must be distinguishable and contain the words "Limited Liability Company," the designatio	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	· · · · · · · · · · · · · · · · · · ·
•	
•	
(Principal office address MUST BE A STREET ADDRESS)	
(Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS) Enter new mailing 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)	7
(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 regist
(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,	7
(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, agent and/or the new registered office address here:	enter the name of the new regist
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, agent and/or the new registered office address here: Name of New Registered Agent:	enter the name of the new regist

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 hability company has been notified in writing of this change.

Cuy

If Changing Registered Agent, Signature of New Registered Agent

Florida Zip Code

≟o:	18506176383	From: 1469317	3436 Date:	05/05/23	Time: 9:4	9 PM	Page:	03/04

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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>	Address	Type of Action
			□ Add
			[]Remove
			☐ Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			UChange
_			🗀 Add
			□Remove
			LJChange
			□ Add
			□Remove
			LIC hange
			∐Add
			□Remove
			[]Change

D. If amending any other informa	ition, enter change(s) here:	(Attach additional sheets, if new	essary.)
	-		
		,	
			MINISTRALIA (1971)
	.		
			
			
			
E. Effective date, if other than the (If an effective date is listed, the date musing Note: If the date inserted in this blaceument's effective date on the D	st be specific and cannot be prior to lock does not meet the applicab	(option date of filmg or more than 90 days after the statutory filing requirements, the	filing 3 Pursuant to 608 0207 (3)(5)
If the record specifies a delayed effective record is filed	e date, but not an effective tim	e, at 12 01 a m, on the earlier of (b) The 90th day after the
Dated April 26th	2023	<u>-</u> ·	
Michele Angelo Catag	cane Signature of a member or authori	ized representative of a member	
Michele Angelo Catapa		·	
	Typed o: pr:nted	name of signee	

• So: 18506176383 From: 14693173436 Date: 05/05/23 Time: 9:49 PM Page: 04/04

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