

# L20 000159 828

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

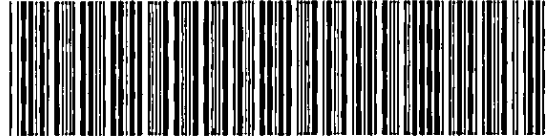
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## 500366903995

05/25/21--01012--005 \*25.00

FILED  
2021 MAY 25 PM 3:24  
CLERK OF COURT  
CLERK OF COURT

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** GRAVITY TAPROOM 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:

Bradford L Barrett II

\_\_\_\_\_  
Name of Person

Gravity Taproom LLC

\_\_\_\_\_  
Firm/Company

10211 Authors Way

\_\_\_\_\_  
Address

Orlando, FL 32832

\_\_\_\_\_  
City/State and Zip Code

brad@gravitytaproom.com

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

For further information concerning this matter, please call:

Bradford L Barrett II

352 246-2306  
at ( )

\_\_\_\_\_  
Name of Person

Area Code

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

**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>
AMBR	Ray F Witkins	5375 Chiswick Circle	<input checked="" type="checkbox"/> Add
		Belle Isle, FL 32812	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Boyd E. Perry	13690 Grunberg Ave	<input checked="" type="checkbox"/> Add
		Orlando, FL 32827	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change


2021 MAY 25 PM 3: 25  
CITY OF LOS ANGELES

2021 MAY 25 PM 3: 25

(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.

2021



Signature of a member or authorized representative of a member

Bradford L. Barrett II

Typed or printed name of signee

**Filing Fee: \$25.00**