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COVER LETTER

TO: Registration Division of C			1
	ÉIQUORS XVIII, LLC		1
SUBJECT:	Name of Lin	nited Liability Company	
	of Amendment and fee(s) are sub pondence concerning this matter		
	Jorge A. Alvarez, Esq.		
		Name of Person	
	Rodon Law, PLLC		2024.S
		Firm/Company	
	201 Alhambra Circle, Sui	te 504	FE ILL PH IS IN SECRETARY OF STATE STATE
		Address	जुन है (
	Coral Gables, FL 33134		Mo T
	· · · · · · ·	City/State and Zip Code	, 4.1
	jalvarez@sraław.com	to be used for future annual report notifi	cation)
For further information	concerning this matter, please c	·	Calling
Jorge A. Alvarez, Esq.		305 445-8881	
Name	of Person	at () 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 Addr Registration Division of		<u>Street Address:</u> Registration Sec Division of Corp	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CROWN LIQUORS XVIII. LLC			
(Name of the Limi	ted Liability Company as it no (A Florida Limited Liability Co	ow appears on our records.) ompany)	
The Articles of Organization for this Limited L	iability Company were file	ed on September 30, 2020	and assigned
lorida document number 1.20000308624	·		
his amendment is submitted to amend the foll	lowing:		
A. If amending name, enter the new name of	of the limited liability com	pany here:	
he new name must be distinguishable and contain the	words "Limited Liability Compa	my." the designation "LLC" or the	
Inter new principal offices address, if appli	cable:		2024 SE
Principal office address MUST BE A STREI	ET ADDRESS)		SEP SEP
	<u></u>		25
			P COC PE IN
nter new mailing address, if applicable:			THE THE PARTY OF T
Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		<u> </u>
B. If amending the registered agent and/or agent and/or the new registered office addre		on our records, <u>enter the r</u>	name of the new register
		RODON ALVAREZ LAV	W, PLLC
Name of New Registered Agent:	-RODON LAW, PLLC-		
New Registered Office Address:	201 Alhambra Circle, Su	ite 504	
		Enter Florida street address	
	Coral Gables	Florida	33134
	City	•	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby occept 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.

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>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
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			SECRE AND ALL
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			CO CO COMPANSE
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ective date, if other than the effective date is listed, the date in the: If the date inserted in this ument's effective date on the	ust be specific ar block does not	nd cannot be prior meet the applic	able statutory fi	r more than 90 days	optional) after filing.) Pursu s. this date will no	ant to 605.020 of be listed a
cord specifies a delayed effect s filed.	ive date, b ut no	ot an effective ti	me, at 12:01 a.i	n, on the earlier o	of: (b) The 90th	day after th
June 13 ed		2024				
	Z W	yaya]			
· - ·	Signature of a	emper or autho	rized representat	ive of a member		