

L21 000235505

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

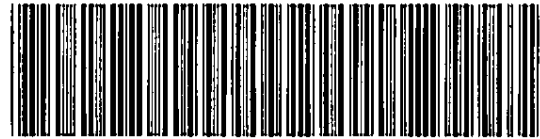
(Business Entity Name)

(Document Number)

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FALL AHEADS

FILED

5/27/20/21

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: IBC Tasting Room Survivor, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Colby J. Kempe, Esq.

Name of Person

Joseph C. Kempe, Professional Association

Firm Company

941 N. HWY A1A

Address

Jupiter, FL 33477

City State and Zip Code

Colbykempe@kempelaw.com

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

For further information concerning this matter, please call:

Tyrone Bradley

305 508-9093

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

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TALLAHASSEE, FL  
S&P REGISTRATION

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

IBC Tasting Room Survivor, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on May 20, 2021 and assigned Florida document number 1.21000235505.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**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, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

3200 St. Lucie Blvd.

*Enter Florida street address*

Fort Pierce

*City*

Florida

34946

*Zip Code*

**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.*

**If Changing Registered Agent, Signature of New Registered Agent**

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21 JUN 25 PM 11:54  
STATE OF FLORIDA  
TALLAHASSEE, FL

MGR = Manager  
AMBR = Authorized Member

21 JUN 25 PM 11:56  
Add  
Change  
Remove  
Add  
Remove

11

[illegible]

(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 record is filed.

June 22nd, 2021

Tyrone M. Bradley, President of Islamorada Beverages Holdings, Inc.

21 JUN 25 PM 11:54  
STATIONER  
FALL BRANCH

77

**Filing Fee: \$25.00**