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2021 OCT 27 PM 2: 45 SECNET/RECOS STATE

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TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

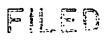
2021 OCT 27 PH 2:40 Division of Corporations Islamorada Brewing Company Survivor, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Colby J. Kempe, Esq. Name of Person Joseph C. Kempe, P.A. 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: Colby J. Kempe, Esq. Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$60.00 Filing Fee, **■** \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$25.00 Filing Fee Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED OF



2021 OCT 27 PM 2: 45

(Name of the Limited Liability Company as it now appears on our records (A. Florida Limited Liability Company) TALL AHASSIC, FL The Articles of Organization for this Limited Liability Company were filed on ______ and assigned Florida document number L21000235530 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Islamorada Brewing Company, LLC. 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: Enter Florida street address

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

Islamorada Brewing Company Survivor, LLC.

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

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>	Type of Action
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D. If amo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an eff <u>Note:</u>	ive date, if other than the date of filing:
If the recor	d 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 led.
Dated	October 21st . 2021
	Mury
	Signature of a member of authorized representative of a member
	Tyrone Bradley

Filing Fee: \$25.00

Typed or printed name of signee