

h21000235555

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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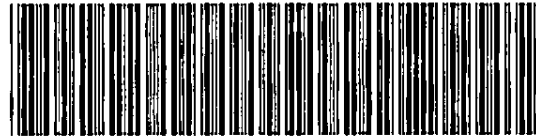
(Business Entity Name)

(Document Number)

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STATE DEPT OF TREASURY
FALLS CHURCH, VA

53
7/20/21

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Islamorada Distilling 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 1A

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

21 JUN 25 PM 11:54
Sherrill
TALLAHASSEE

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

Islamorada Distilling 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 1,21000235555.

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Islamorada Beverages Holdings, Inc	3200 St. Lucie Blvd.	<input type="checkbox"/> Add
		Fort Pierce, FL 34946	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Tyrone M. Bradley	3200 St. Lucie Blvd.	<input checked="" type="checkbox"/> Add
		Fort Pierce, FL 34946	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Christopher Trentine	88950 Overseas Highway	<input checked="" type="checkbox"/> Add
		Tavernier, FL 33070	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Nikolaus Schroth	1307 Chippewa St.	<input checked="" type="checkbox"/> Add
		Jupiter, FL 33458	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[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 the record is filed.

Sure 22nd, 2021

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

90th day after the

21 JUN 25 PM 11:51

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SEAL

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

Filing Fee: \$25.00