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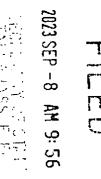
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COVER LETTER

Registration Section Division of Corporations

fO:

SUBJECT:	Lighthouse	Brewing Company LLC		
SOBJECT.		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Jonathan Taboada		
			Name of Person	
		ZenBusiness INC		
			Firm/Company	
		336 E. College Ave Suite :	301	
			Address	
		Tallahassee, FL 32301		
			City/State and Zip Code	
		fuitillment@zenbusiness.co	om	
		E-mail address: (to be used for future annual repor	t notification)
for further in	formation c	oncerning this matter, please ca	all:	
c/o ZenBusi	ness INC		8-14 -493-62- at ()	
	Name o	f Person	Area Code Di	iytime Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 Fi	iling 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)
Reg Div P.O	ling Addres istration S ision of C . Box 632 ahassee, I	Section orporations 7	The Centre	Section Corporations of Tallahassee onroe Street, Suite 810

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

Lighthouse Brewing Company LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	mpany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp	any were filed on <u>08/28/2023</u>	_ and assigned
Florida document number 1.21000383955		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
Sandbar Brewing Company LLC		
The new name must be distinguishable and contain the words "Limited I	liability Company," the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	2	
Enter new mailing address, if applicable:		2023
(Mailing address MAY BE A POST OFFICE BOX)	7. j '	<u> </u>
	<u> </u>	
B. If amending the registered agent and/or registered off	7.5.5 1.5.5.	
B. If amending the registered agent and/or registered off	ice address on our records, enter the name o	Fine new-registere
agent and/or the new registered office address here:		
		0
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Age	ent:	

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>l'itle</u>	Name	Address	Type of Action
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□ Remove
			□Change
			□Add
		 	□Remove
			□Change
			□Add
			□ Remove
			☐ Change

Note: If the date insert	than the date of filing:
ne record specifies a dela ord is filed.	nyed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	
/s/Jeremy B	laise
	Signature of a member or authorized representative of a member
Jeremy Blai	se, Manager
	Typed or printed name of signee