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From:

: DAVID C. HASTINGS, CPA, PA Account Name

Account Number : I20000000168

Phone

: (727)322-0909

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BONSAI BEVERAGE LLC

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DONICAT DRIVER AGE LLC

company has been notified in writing of this change.

HEAD COUSSIDES HOBECONE No. 9450 P. 4/6 ARTICLES OF AMENDMENT

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on 12/06/2021 and assigned Florida document number L21000513726 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: BONSAI BEVERAGE CO, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 Agent: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Enter Florida street address	(Name of the Limited Liability Com	pany as It now appears on our records.) d Liability Company)		-	
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<u></u>					
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the	I hereby accept the appointment as registered agent and a	igree to act in this capacity. I further ag	ree to co familia:	mply w	nth 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	provisions of all statutes relative to the proper and comple	ese perjormance of my ausses, and 1 am as provided for in Chapter 605 F.S. Or	jumuar if this A	мин ил Осиман	u tis

If Changing Registered Agent, Signature of New Registered Agent

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being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

Mar. 29. 2023 2:37PM

Mar. 29. 2023 2:37PM HDRECOLSS / 1437 No. 0450 P. 5/6
If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: H331001187113

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	RACHAEL BRINSON	1400 GANDY BLVD N #1008	🖸 Add
		ST PETERSBURG, FL 33702	\ _Remove
			\are Change
MGR	IAN ONEILL	3120 BEACH BLVD S APT 2	
	GULFPORT, FL 33707		
			——— ≅Change
MGR	EAN NEVILLE	9420 MONICA DR	🖸 Add
	SEMINOLE, FL 33777	□Remove	
		EChange	
			CAdd
			□Remove
1			Change
			□Add
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			CRemove
			□Change

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	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ve date, if other than the date of filing: (optional) ective 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 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
f the record	I 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 ed.
Dated _	Signature of a member or authorized representative of a member
	RACHAEL BRINSON Typed or printed name of signee

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Filing Fee: \$25.00