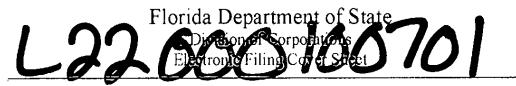
3/29/22, 2:26 PM

From: 7188888559

I N C Webfax

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Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : I.N.C. CORPORATE SERVICES

Account Number : I20000000011 Phone : (718)888-7773

Fax Number : (718)888-8559

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

CS@INCFILINGS.COM

ۻ LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **CUVE BEVERAGE LLC** Certificate of Status Certified Copy Page Count Estimated Charge

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\$25.00

Tallahassee, FL 32303

COVER LETTER

	Registration Se Division of Cor			1 to 1 to 1		
eun ice		CUVE BEVERAGE LLC				
SUBJECT: Name of Limited Liability Company						
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	tum all correspo	ondence concerning this matter	to the following:			
		Jay Ku				
Name of Person						
INC Corporate Services						
			Firm/Company			
45-04 162nd Street, Suite 203						
			Address			
	Flushing, NY 11358					
			City/State and Zip Code			
		CS@INCFILINGS.COM				
		E-mail address (to be used for future annual report not	fication)		
For furth	er information o	oncerning this matter, please co	ali:			
Jay Ku			71\$ 888-7773			
Name of Person			Area Code Daytin	ne Telephone Number		
Enclosed	is a check for th	ne following amount:				
₩\$25.	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address: Registration Section			Street Address: Registration Se			
Division of Corporations P.O. Box 6327				Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314				2415 N. Monroe Street, Suite 810		

03/29/2022 15:38

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

From:7188888559

CUVE BEVERAGE LLC								
(Name of the Limit	ed 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 and assigned and assigned								
This amendment is submitted to amend the following	owing:							
A. If amending name, enter the new name of	f the limited liability company here:							
The new name must be distinguishable and contain the w	vords "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."						
Enter new principal offices address, if applic	able:							
(Principal office address MUST BE A STREE	TADDRESS)							
Enter new mailing address, if applicable:								
(Mailing address MAY BE A POST OFFICE								
B. If amending the registered agent and/or ragent and/or the new registered office address	registered office address on our records, <u>enter the na</u> ss here:	2022 (EC						
Name of New Registered Agent:	ALEJANDRO JOSE MACHADO	A 2						
New Registered Office Address:		29 FILE						
	Enter Florida street address	A CONTRACTOR						
	, Florida							
	Cliy	· 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

03/29/2022 15:38

From:7188888559

I N C Webfax

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If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ALEJANDRO JOSE MACHADO	7900 NOVA DRIVE, SUITE 209	= Add
		DAVIE, FL 33324	Пепюче
			[]Change
MGR	JOYCE GONZALEZ	7900 NOVA DRIVE, SUITE 209	
		DAVIE, FL 33324	■Remove
			[]Change
			□Add
		<u> </u>	□Remove
			☐Change
			□Add
			□Remove
			[.] Change
			DAdd
			Remove
			□Charge
			□Add
			□Remove
			Change

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Typed or printed name of signee