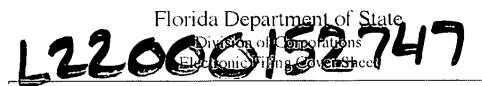
To: 18506176383 From: 12147128131 Date: 09/15/22 Time: 10:28 PM Page: 01/05



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.

(((H220003178853)))



H220003178853ABC3

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

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

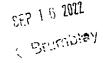
Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THE BOURBON BROTHERS LLC

Certificate of Status	0
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Help



To: 18506176383 From: 12147128131 Date: 09/15/22 Time: 10:28 PM Page: 03/05

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE BOURBON BROTHERS LLC

(((H22000317885 3)))

(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) nability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000152747</u>	were filed on 03/29/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abi	previation "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 a agent and/or the new registered office address here:	iddress on our records, <u>enter the nam</u>	e of the new registered
Name of New Registered Agent:		202
New Registered Office Address:		ORE:
1. Con Logario Con Carlos Lagrana	Enter Florida street address	FILE FILE
	, Florida <u>res</u> , Florida <u>res</u>	Zip Zide O
New Registered Agent's Signature, if changing Registered Agent:	-	် မှ
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pering filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am f provided for in Chapter 605, F.S. Or,	amiliar with and if this document is

If Changing Registered Agent, Signature of New Registered Agent

To: 18506176383 From: 12147128131 Date: 09/15/22 Time: 10:28 PM Page: 04/05

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being added or removed from our records:

(((H22000317885 3)))

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	NICHOLAS STEINLIGHT	772 MEADOWLARK COURT	□ Add
		LONGWOOD, FL 32750	■Remove
			□ Change
			Remove
			
		 	□Remove
			Change
		<u> </u>	[] Add
			□Remove
			☐ Change
			🖸 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			[]Change

amending any other info	ormation, enter c	hange(s) here:	(Attach addu	nonal sheets, if i	iecessary.)	
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Tective date, if other that an effective date is listed, the dote: If the date inserted in secument's effective date on	ate must be specific an this block does not	d cannot be prior t meet the applica	to date of filing or able statutory fil	more than 90 days	optional) after filing) Puiscant to , this date will not be	605 020' listed as
ecord specifies a delayed easier filed.	ffective date, but no	t an effective tir	me, at 12.01 a.n	a, on the earlier o	f; (b) The 90th day :	after the
September 2nd		2022	1			
	-	-				

(((H22000317885 3)))