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COVER LETTER

TO: > Registration Sec Division of Corp		· · · · · · · · · · · · · · · · · · ·	
SUBJECT;	he Brew J Name of Lim	ay L.L.C.	<u>~</u>
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Ashley Lu	Name of Person	
		Firm/Company	
	5220 Roya	1 Cypress Circle.	ap+#5220
	Tampa, I	Florida 33647 City/State and Zip Code	7
	ashlesanointe	City/State and Zip Code A Massage (a) GMai). (to be used for buture annual report notif	CA)
For further information co	ncerning this matter, please ca	all:	
Ashley Name of	Person	at (<u>813</u>) <u>733</u> Area Code Daytimo	- 2261 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability C	· L.L.C.
(A Florida Lin	Company as it now appears on our records.) imited Liability Company)
The Articles of Organization for this Limited Liability Com Florida document number 12200536.	spany were filed on $\frac{1/23/33}{3}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited Diamond Royal Logistic The new name must be distinguishable and contain the words "Limited"	d liability company here: d Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	ار المحادث الم المحادث المحادث المحاد
(Principal office address MUST BE A STREET ADDRES	<u>SS)</u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, enter the name of the new registered
Name of New Registered Agent:	MA N/O
New Registered Office Address:	[V]]+ Enter Florida street address
/	MA City . Florida

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

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>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
	· · ·		□Add
		- C. win 12	demove
		-, · · · · · · · · · · · · · · · · · · ·	□Change
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amo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	in the process of Changing my Eint, MCH, DO+H,
	BOCZ FF, etc. I criginally west into a besizes
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7	Partnershy with some else, but this person has not
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reffe <u>te:</u>	ve date, if other than the date of filing:
cord s tile	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.
ed _	2/14/23 Askling / 2011:
	Signature of a member or authorized representative of a member
	Acido 1 1:11:
	Typed or printed name of signee

ET CATOO