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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT (Business Entity Name) (Document Number) Certified Copies Certificates of Special Instructions to Filing Officer:	MAIL	
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Y. SCOTT JUN 2 4 2023

COVER LETTER

TO: Registration Division of (Section Corporations		g. ·
SOAR B	BEVERAGES LLC		
	Name of L	imited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are s	ubmitted for filing	
	pondence concerning this matt		
	Leila Ros		
		Name of Person	
	AEGIS Law		
		Firm/Company	
	2023 SEC		
		Address	
	Tampa FL 33602		2023 MAY -8
	lros@aegislaw.com	City/State and Zip Code	GF STATE OF STATE
For further information (E-mail address: concerning this matter, please of	(to be used for future annual report not	ification)
Leila Ros		813 999-0199	
Name o	of Person	at () Area Code Daytim	e Telephone Number
inclosed is a check for the	he 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 Addres		Street Address:	
Registration S Division of Co		Registration Sec	
P.O. Box 632		Division of Con	porations
Tallahassee, F		The Centre of Ta	allahassee Street Suite \$10

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOAR BEVERAGES LLC	
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on 12/29/2022
Florida document number 1.23000003979	were filed on and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	llity company here:
JRZ Hydration LLC	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "I C" or the appreviation "I I C"
Enter new principal offices address, if applicable:	b and the above various 1e.c.
Principal office address MUST BE A STREET ADDRESS)	
	\$ 2
	2023 1 1 E 2013 1 1 E 2013 1 E
nter new mailing address, if applicable:	THE WAY
Mailing address MAY BE A POST OFFICE BOX)	- CO
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. If amending the registered agent and/or registered office acted and/or the new registered office address because	Idress on our reports and the Control
gent and/or the new registered office address here:	records, enter the name of the new registe
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City 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

If unending 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

Title	<u>Name</u>	Address	Type of Action
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			□ Change
			□Add
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