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Division of Corporations

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Account Number : I20230000084 Phone : (305)914-2419 Fax Number : (305)914-2419

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-mall	Address:	

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т Р/Г.Т.ТР	AMENDMENT/RESTATEMENT/CORRECTION
	244
	BEVTALK CONSULTING (LLC)

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COVER LETTER

	tration Section= on of Corporations	
SUBJECT.	EVÎTALK LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed A	Articles of Amendment and fee(s) are submitted for filing.	
Please return a	If correspondence concerning this matter to the following:	1
	PETER ROMERO	
	Name of Person	
	BEVTALK LLC	
	Firm/Company	:
	Address	
	1892 CHEETHAM BLVD	
	City/State and Zip Code LOXAHATCHEE, FL 33470	:
	E-mail address: (to be used for future annual report notific	ation)
For further inf	ormation concerning this matter, please call:	
JOHN O'MER	at ()	!
	Name of Person Area Code Daytime	Telephone Number
Enclosed is a c	theck for the following amount:	
■ \$ 25. 0 0 Fil	ing Fee S30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)	© \$60.00 Fiting Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regi Divi P.O.	Ing Address: Street Address: Stration Section Scient of Corporations Box 6327 The Centre of Ta Tallahassee, FL 32314 Street Address: Registration Section The Centre of Ta	orations illahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BEVTALK LLC		
(Name of the Limited Liability Company (A Florida Limited Liab	is II now appears on our recility Company)	ras.)
The Articles of Organization for this Limited Liability Company we	re filed on FEBRUARY 1	6,2023 and assigned
Florida document number L23000084627		
This amendment is submitted to amend the following:	:	
A. If amending name, enter the new name of the limited liabilit	v company here:	
BEVTALK DISTRIBUTING LLC		
he new name must be distinguishable and contain the words "Limited Liability	Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	,	2024 F
		F E E
		5 5
Enter new mailing address, if applicable:		SSC A T
Mailing address MAY BE A POST OFFICE BOX)	;	باز ه ن
Printing markets were really state of the Board	i i	22 AH
B. If amending the registered agent and/or registered office address here: Name of New Registered Agent:	ress on our records, <u>cn</u>	cr the name of the new register
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 provisions of all statutes relative to the proper and complete peaccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office accompany has been notified in writing of this change.	rformance of my duties, wided for in Chapter 60	and I am familiar with and 5. F.S. Or, if this document is
If Changh	ng Registered Agent, <u>Signatu</u>	re of New Registered Agent

f amendir r remove	ng Authorized Person(s) authorized to m d from our records;	ialiage, enter the title, name, and	address of each person being ad-
1GR = 1 MBR =	Manager Authorized Member		
<u>`itle</u>	<u>Name</u>	Address	Type of Action
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			□Removo
			☐ Change
			Add
			□Remove
			□ Change
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). If amending any other inform	iation, enter change(s) her	e: (Attach additional s	sneets, ij necessary.)
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1400			
	11. Alexander (17. Al		
Effective date, if other than t (If an effective date is listed, the date is Note: If the date inserted in this document's effective date on the	he date of filing: must be specific and cannot be prio block does not meet the appli	cable statutory filing req	(optional) nan 90 days after filing.) Pursuant to 605,020 juirements, this date will not be listed a
the record specifies a delayed effectord is filed.	tive date, but not an effective	time, at 12:01 a.m. on th	e carlier of: (b) The 90th day after the
Dated FEBRUARY 6	, 2024		
	الله المنظمة ا المنظمة المنظمة	and the state of t	<u> </u>
	Signature of a member or and	norized representative of a	member
	Peter I	POMETO nted name of signee	
,	Typed or prit	ited name of signee	