L23000323542

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COVER LETTER

TO: Registration S Division of Co						
	Brew Vault LLC					
SUBJECT:	Name of Lin	nited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspondent	ondence concerning this matter	to the following:				
	Jessica Cooper					
		Name of Person				
	Last Brew Vault LLC					
		Firm/Company				
	384 Edgewood RD					
		Address				
	Defuniak Springs, FL 324	35				
		City/State and Zip Code				
	laststopbrewvault@gmail.c	om (to be used for future annual report)	identitus)			
For further information of	concerning this matter, please c	•	ioni (canon)			
Jessica Cooper		760 533-4396	5			
Name o	of Person		time Telephone Number			
Enclosed is a check for t	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 Address: Registration Section		Street Address: Registration Section				
Division of C P.O. Box 632		Division of Corporations				
Tallahassee,			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Last Stop Brew Vault LLC (Name of the Limited 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 2023-07-07 ALLARA SEE and assigned Florida document number L23000323542 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C" or the abbreviation "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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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 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

Title	<u>Name</u>	Address	Type of Action
MGR	Galen Cooper	384 EDGEWOOD ROAD DEFUNIAK SPRINGS, F	L 32435 _□Add
			_ =Remove
			_ □Change
MGR	Alexa Peters	269 BONITA DRIVE DEFUNIAK SPRINGS, FL 32	4 <i>3}</i> _ □Add
			_ = Remove
			_ 🗆 Change
MGR	Sonja Barreto	508 GRAYS @ N LANE DEFUNIAK SPRINGS, FL	32 4 35 _ □Add
			=Remove
			_ Change
			□Add
			_ □Remove
			_ Change
			_ 🗆 Add
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(If an effec Note: If	e date, if other the tive date is listed, the f the date inserted in nt's effective date o	date must be spec a this block doc	cific and cannot is not meet the	e applicable	te of filing or m		after filing.) Pursua	
he record ord is filed	specifies a delayed d.	effective date.	but not an eff	ective time,	at 12:01 a.m.	on the earlier of	: (b) The 90th	day after the
D 2	3AUG2023							
Dated	\cap	0	P ()					
		Signatu	re of a member	r or authorized	d representative	of a member		
	/ /	•	<i>-</i> 1					