

To:

Page: 1 of 5

2024-08-16 09:54:00 UTC-14

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From: ZenBusiness User

15/8/24, 14:49

Division of Corporations

LA 240002745143

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC.
Account Number : 120230000190
Phone : (844)449-3624
Fax Number : (512)597-0678

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
BEACH BUM BEARDIES LLC

Certificate of Status	0
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STATE OF FLORIDA
DIVISION OF CORPORATIONS

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T. LEITCH

AUG 16 2024

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Beach Bum Beardies LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jonathan Taboada
Name of Person
ZenBusiness Inc
Firm/Company
336 E. College Ave Suite 301
Address
Tallahassee, FL 32301
City, State and Zip Code
fulfillment@zenbusiness.com
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

c/o ZenBusiness INC
844 493-6249
Name of Person Area Code Daytime 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

Reach Your Beadies 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 08/15/2024 and assigned Florida document number 124000124668.

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 "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

7036 Tylertwood Ct

Milton, FL 32570

Eschambia County, S.

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7036 Tylerwood Ct

Mullen, PL 32570

Escambia County, S

13. 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:

Home/Parade street address

Florida

1. *En*

2.2.2. *Modeling*

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>	<u>Type of Action</u>
AMBR	Stephen Cody Kester	7036 Lylewood Ct	☐ Add
		Milton, FL 32570	☐ Remove
		US	☒ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary)*

F. Effective date, if other than the date of filing: _____ (optional)

(f) If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 602.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated 08.15.2024

⁵⁰Stephen early Kester

Signature of a member or authorized representative of a member

Stephen Cody Kester, Member

Typed or printed name of source

Filing Fee: \$25.00