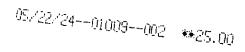
L24000193487

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

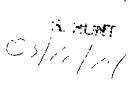
Office Use Only



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COVER LETTER

TO: **Registration Section Division of Corporations**

BULLETPI SUBJECT:	ROOF WINE & SPIRITS, INC		· · · · · · · · · · · · · · · · · · ·	
	Name of Lim	ited Liability Company		
***LLC name was	improperly approved as INC**	*		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	GREEN	FELD. MICHAEL G		
		Name of Person		
		Firm/Company		
	225 [BLACKBIRD LANE		
		Address		
	JUP	TER, FL 33458		
		City/State and Zip Code		
		/INO1@GMAIL.COM to be used for future annual report noti	fication)	. :
For further information c	oncerning this matter, please c			다 <u>으</u>
Matthew Munsel	1 EA	at (561) 339-6054		
Name o	f Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for th	ne 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 Stat Certified Copy (additional copy is end	us &

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

BULLE	TPROOF WINE & SPIRITS, IN	C	
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears a Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability	Company were filed on	4/24/2024	and assigned
lorida document number <u>L24000193487</u>			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company he	re:	
BULLETPROOF WINE & SPIRITS, LLC			
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the de	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADD	RESS)		
	<u> </u>		
			•
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			•
	-		
B. If amending the registered agent and/or registere	d office address on our re	cords enter the na	← ; me of the new register
agent and/or the new registered office address here:	d office address on our re	· · · ·	····
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flori	da 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 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>	Address	Type of Action
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			☐ Change
		· .	. □ Remove
			· ☐Change
			□Remove
		- <u></u>	□Change
			□ Add
			□ Remove
			□Change
			🗆 Add

_____ □Remove

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Please note that the LLC application was improperly approve	ed with the name
BULLETPROOF WINE & SPIRITS, INC. Please change to	BULLETPROOF WINE & SPIRITS, LLC.
	<u></u>
	<u>; </u>
tive date, if other than the date of filing: fective date is listed, the date must be specific and cannot be prior to date of	(optional) filing or more than 90 days after filing.) Pursuant to 605.
If the date inserted in this block does not meet the applicable statuent's effective date on the Department of State's records.	
icht s effective date off the Department of State s records.	
rd specifies a delayed effective date, but not an effective time, at 12	:01 a.m. on the earlier of: (b) The 90th day after
iled.	•
Mov 10th 2024	
May 10th 2024	

Typed or printed name of signee