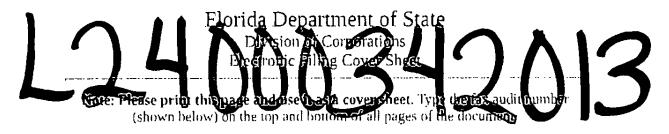
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Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190

: (844)449-3624 Phone 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.**

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NEWLAND SPIRITS LLC

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To:

2024-09-25 06:05:51 UTC+14

18506176383

From: ZenBusiness User H124000324894 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ppears on our records.)		
the Articles of Organization for this Limited Liability Company were filed of orida document number $\frac{1.24090342013}{1.000000000000000000000000000000000000$	n <u>8/2/2024</u>	and assi	gned
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited liability compar	iy here:		
ne new name must be distinguishable and contain the words "Limited Liability Company,"	the designation "LLC" or the abb	revistion "L.I	C."
nter new principal offices address, if applicable:		20 2	
Principal office address MUST BE A STREET ADDRESS)		SEP	دي. د
		<u></u>	****
nter new mailing address, if applicable:	5		IT
duiling address MAY BE A POST OFFICE BOX)		- F	<u> </u>
		<u> </u>	

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:

18506176383

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Matthew Bindel	2307 Greenwillow Drive	■Add
		Orlando, FL 32825-7572	□Remove
			[]Change
AMBR	MapleOnTop LLC	611 South DuPont Highway Suite 102	≘ Add
		Dover, DE 19901	□Remove
AMBR	Mukers Ventures LLC	1147 Marsh Street	= Add
		San Luis Obispo, CA 93401	vo ⊡ka jove
			24 10 10 10 10 10 10 10 10 10 10 10 10 10
			Fig. 1
			□Change
			□Add
			□Remove
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		.	□Remove
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Page: 4 of 4

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ffective date, if other than t	he date of filing:	(optional)	
an effective date is listed, the date	must be specific and cannot be prior to date of filing s block does not meet the applicable statutory	or more than 90 days after filing.) Pursuant filing requirements, this date will not be	ro 605,0207 re listed as
ocument's effective date on the	2 Department of State's records.		
	ctive date, but not an effective time, at 12:01 a	i'm on the carrier of, {p} - the with diff	i, atter the
is filed			
9/24	2024		
9/24 Pated			
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