L25000285037

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2025 AUG -4 PH 1: 52

of 9/22/2025

COVER LETTER

Division of Corporations SUBJECT: Division Subject Division of Corporations			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Josue	Name of Person	۷
	7059 5	orange Blog	ssom Trl
	Orland	0 FL 32809	
	Josue	Name of Limited Liability Company ment and fee(s) are submitted for filing. concerning this matter to the following: JOSUE D VIII a CIS Name of Person Firm/Company Address Orlando FL 32809 City/State and Zip Code JOSUE BEALET and Josue Com E-mail address: (to be used for future annual report notification) ng this matter, please call: Macis at (305) 9657304 Area Code Daytime Telephone Number Sol.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee &	
For further information c	oncerning this matter, please ca	all:	
JOSUE D			2304 e Telephone Number
Enclosed is a check for the	ne following amount:		
\$\$ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

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

FILED

Dink Bar	LLC	2025 AUG -4 PM 1:52			
(Name of the Limited Liability Compa (A Florida Limited l	ny as it now appears on our records.) Liability Company)	SECREMENT OF THE			
The Articles of Organization for this Limited Liability Company Florida document number <u>L2500285037</u>	were filed on 06 18 2	O25 and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab Beaker & Co LLC The new name must be distinguishable and contain the words "Limited Liabi		e abbreviation "L.L.C."			
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		<u>Blossom</u> Trl 32809			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8222 Southern Orlando FL 3	forest Drive			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the n</u>	ame of the new registered			
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address				
	, Florida	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 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
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<u>tote:</u> If th	he date inserted	than the date ne date must be spe in this block do on the Departn	es not meet th	ie applicable sta	of filing or more tutory filing re	(option than 90 days after equirements, this	onal) filing.) Pursuant to 6 date will not be li	05.0207 sted as
record sp l is filed.	ecifies a delaye	ed effective date,	but not an ef	fective time, at	2:01 a.m. on t	he earlier of: (b)	The 90th day af	ter the
ated	Wly	18	20)25)	mjm		
		Signat	ure of a membe	er or authorized re	presentative of a	n member		
			\	N . 1.	\widetilde{II} .	_		