M16000009039

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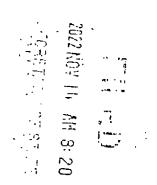
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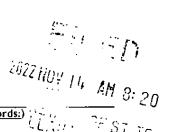
Tallahassee, FL 32314

A			
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Dean McKinney		
	The Yerba Mate Co LLC Firm/Company 4500 Salisbury Road. Suite 540 Address Jacksonville, FL 32216 City/State and Zip Code dean.mekinney@guayaki.com E-mail address: (to be used for future annual report notification) afformation concerning this matter, please call: mey Name of Person 1 (229) 412-6393 Area Code Daytime Telephone Number Area Code Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)		
	The Yerba Mate Co., LLC	Name of Person te Co LLC Firm/Company Road, Suite 540 Address L 32216 City/State and Zip Code @guayaki.com nail address: (to be used for future annual report notification) ter, please call: at (
	The Yerba Mate Co., LLC Name of Limited Liability Company Name of Amendment and fee(s) are submitted for filing. Il correspondence concerning this matter to the following: Dean McKinney		
		Address	
	Jacksonville, FL 32216		
		City/State and Zip Code	
For further informatic			nncation
	are concerning this moner, preuse e		
Dean McKinney			
Nan	ne of Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for	or the following amount:		
□ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
			ection
Division o	f Corporations	Division of Co	rporations
P.O. Box 6	5327	The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



The Yerba Mate Co., LLC

(Name of the Limited Liability Company as it now appears on our records:)

(A Florida Limited Liability Company)

(ATT MAKE	a Limited Elability Company	- 13 的是
The Articles of Organization for this Limited Liability G	Company were filed on 11/09/2016	and assigned
lorida document number M16000009039	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
'he new name must be distinguishable and contain the words "Lit	nited 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 ADD	RESS)	
		-
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	 -	
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		nter the name of the new registe
Name of New Registered Agent:		 .
New Registered Office Address:	Enter Florida street ac	ldress
		, 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 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
MGR	Rich, Todd	4500 Salisbury Road	
		Suite 540	■Remove
		Jacksonville, FL 32216	□Change
MGR	Baaissa, Ouenda	4500 Salisbury Road	∃ Add
		Suite 540	□Remove
		4500 Salisbury Road	
MGR	Price, Kevin	4500 Salisbury Road	= Add
		Suite 540	Remove
		4500 Salisbury Road	□Change
MGR	McKinney, Dean	4500 Salisbury Road	
		Suite 540	□ Remove
		Jacksonville, FL 32216	□Change
			□Remove
			□Add
			□Remove
			□Change

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ffective date, if other than th	a data of filing:		(optional)	
an effective date is listed, the date m	ust be specific and cannot be price	or to date of filing or more than	190 days after filing.) Pursuant	το 605.020
Note: If the date inserted in this locument's effective date on the			rements, this date will not l	be listed as
ocument's effective date on the	Department of State's record	S.		
record specifies a delayed effect dis filed.	ive date, but not an effective	time, at 12:01 a.m. on the	eartier of: (b) The 90th da	iy after the
November 8 Dated	2022		\sim	
Jaled	•		2	
		70		
		horized representative of a me		

Filing Fee: \$25.00

Typed or printed name of signce