

354576

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

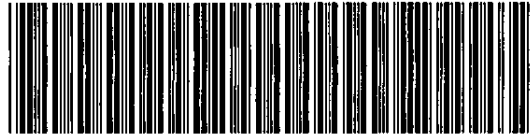
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600220356996

02/07/12--01021--001 \*\*35.00

*Ames*

FILED  
2012 FEB 29 AM 8:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB 29 2012  
T. ROBERTS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 8, 2012

MARI COU-MARTIN  
BACARDI U.S.A., INC.  
2701 LE JEUNE RD  
CORAL GABLES, FL 33134

**COPY**

SUBJECT: BACARDI BOTTLING CORPORATION  
Ref. Number: 354576

We have received your document for BACARDI BOTTLING CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This is a Florida profit corporation, not a Foreign corporation. It appears that you completed the wrong form.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 712A00005489

RECEIVED

12 FEB 29 AM 8:21

REGULATORY DIVISION  
TALLAHASSEE, FLORIDA

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Bacardi Bottling Corporation  
DOCUMENT NUMBER: 354576

The enclosed *Articles of Amendment* and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Mari Cou-Martin, Paralegal  
Name of Contact Person  
Bacardi U.S.A., Inc.  
Firm/ Company  
2701 Le Jeune Road  
Address  
Coral Gables, FL 33134  
City/ State and Zip Code

mcou-martin@bacardi.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mari Cou-Martin at ( 786 ) 264-8111  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- \$35 Filing Fee  
(state already received)
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

Bacardi Bottling Corporation

(Name of Corporation as currently filed with the Florida Dept. of State)

354576

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

n/a  
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

**B. Enter new principal office address, if applicable:**  
(Principal office address MUST BE A STREET ADDRESS)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

n/a  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent \_\_\_\_\_  
n/a  
(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

n/a  
\_\_\_\_\_  
Signature of New Registered Agent, if changing

FILED  
FEB 29 AM 8:51  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:**

*(Attach additional sheets, if necessary).*

*Please note the officer/director title by the first letter of the office title:*

*P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.*

*Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.*

Example:

Change            PT     John Doe

Remove            V     Mike Jones

Add                SV     Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	<i>(Please see attached)</i>	
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____

**OFFICER RIDER**  
**BACARDI BOTTLING CORPORATION**

<b>Name</b>	<b>Title</b>	<b>Address</b>
Eduardo Vallado	DIRECTOR President	12200 North Main Street Jacksonville, FL 32218
Frederick J. Wilson, III	DIRECTOR Secretary	2701 Le Jeune Road Coral Gables, FL 33134
Scott Kriss	DIRECTOR Assistant Treasurer	2701 Le Jeune Road Coral Gables, FL 33134
Walter Rios	Treasurer	12200 North Main Street Jacksonville, FL 32218

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

n/a

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**  
*(if not applicable, indicate N/A)*

n/a

The date of each amendment(s) adoption: 2-27-12


Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval  
by \_\_\_\_\_."  
(voting group)

- The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 2/27/12  


Signature \_\_\_\_\_  
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Frederick J. Wilson III  
(Typed or printed name of person signing)  
Secretary & Director  
(Title of person signing)