

L11000057518

(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



300249733383

07/17/13--01023--004 **25.00

FILED
2013 AUG -6 PM 4:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

AUG - 7 2013

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BORDEAUX WINES & MORE

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LYONEL LAFON

Name of Person

BORDEAUX WINES & MORE

Firm/Company

P.O. BOX 381665

Address

MIAMI, FL 33138

City/State and Zip Code

LYONEL1967@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LYONEL LAFON

Name of Person

at **786 208-2164**

Area Code & Daytime Telephone Number

Enclosed is a check for the 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 Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 AUG -6 PM 4:04

FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BORDEAUX WINES & MORE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/16/2011 and assigned
Florida document number L11000057518.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited 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 ADDRESS)

14837 NE 20 AVE

NORTH MIAMI, FL 33181

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

ARLETTE NEGRE

New Registered Office Address:

14837 NE 20 AVE

Enter Florida street address

NORTH MIAMI

Florida 33181

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 608, 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.

[Signature]
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	LYONEL LAFON	7317 NE 1ST PLACE	☐ Add
		MIAMI, FL 33138	☒ Remove
MGR	ARLETTE NEGRE	14837 NE 20 AVE	☒ Add
		NORTH MIAMI, FL 33181	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2013 JUN -6 PM 3:04

Amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated

08/14/13

Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 AUG -6 PM 4:04

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 18, 2013

LYONE LAFON
BORDEAUX WINES & MORE, LLC
POST OFFICE BOX 381665
MIAMI, FL 33138

SUBJECT: BORDEAUX WINES & MORE, LLC
Ref. Number: L11000057518

2013 AUG -6 PM 4:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

We have received your document for BORDEAUX WINES & MORE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6051.

Barbara Bostick
Regulatory Specialist II

Letter Number: 813A00017506