

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Help

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7/1/2016

TO: Registration S Division of Co			
SUBJECT: Southern	Wine & Spirits Gulf Coast, I	LC.	
		nited Liability Company	
•			
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	•
Please return all correspondent	ondence concerning this matter	to the following:	
,			
	Daniel Connelly		
		Name of Person	
	Hogan Lovells US LLP		
		Firm/Company	
	100 International Drive,	Suite 2000	
		Address	
	Bailimore, MD 21202		
		City/State and Zip Code	
	daniel.connelly@hoganic	ovells.com	ication
For further information of	oncerning this matter, please o	•	out.on,
	, p	•••	
Daniel Connally		at (410) 659-5073 Area Code Deytime	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne following amount:		
	•	53 5 5 6 6 5 NVIII A	FR BAS DO WILL - F
□ \$25,00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filling 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.Q. Box 637.7 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Southern Wine & Spirits Gulf Coast, LLC					
(Name of the Limited Liability (A Florida L	Company a	s It now an lity Compa	nears on our ny)	records.)	
The Articles of Organization for this Limited Liability Con	mpany wer	e filed on	6/21/2005		and assigned
Florida document number L05000061445					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limite	ed Hability	compan	y here:	•	
Southern Glazer's Wine and Spirits Gulf Coast, LLC The new name must be distinguishable and contain the words "Ulmited	ed Liability C	ompany," t	he designation	"LLC" or the abbr	eviation "L.C."
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRES	<u>(\$5)</u>				
					·
Enter your molling address if annihilation					
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)					N
			····		
B. If amending the registered agent and/or register registered agent and/or the new registered office address		address	on our re	cords, enter fr	e name of the new
Name of New Registered Agent:					
New Registered Office Address:					
ACT INSIDE OF THE AUTHOR AND INSIDE		Enter.	Florida street d	address	
				, Florida	
		City			Zip Code
New Registered Agent's Signature, if changing Registered A	Agent:				
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compacted the obligations of my position as registered agen being filed to merely reflect a change in the registered accompany has been notified in writing of this change.	iplete perf nt as provi	ormance ded for i	of my dutie n Chapter (s, and I am fan 505; F.S. Or, if	niliar with and this document is
					₹

If Changing Registered Agent, Signature of New Registered Agent
Page 1 of 3

MGR= 1	Manager		
AMBR =	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

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