## L07000008037

•					
(Requestor's Name)					
(Address)					
, ,					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Basiliosa Ellity Hallo)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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10/29/07--01040--006 \*\*25.00



## **COVER LETTER**

TO: Registration Division of	n Section Corporations		, ,			
SUBJECT:	BENE	ra Lig	uors	ty Company)		
		(Name of L	imited Liabili	ty Company)		
The enclosed Article	es of Amendment	and fee(s) are su	abmitted for fi	ling.		
Please return all corr	respondence conc	erning this matte	er to the follow	ving:		
		SHEILA	A PA	TEL n)	<del></del>	
		BEN	EVA (Firm/Compan	LIQUOR	s, LLC	
	6168	9H	AVE (Address)	CIRCLE	N.E.	
		BRADE		FL 3		
For further informat	ion concerning thi		·	,		
	KIRIT	PATEL	at (	941 , -	725-2525 Lytime Telephone Number)	
	(Name of Pe	erson)		(Area Code & Da	ytime Telephone Number)	2007
Enclosed is a check for	the following amo	unt:			RETA AHAS	Z007 OCT 29
\$25.00 Filing Fee	□ \$30.00 F Certificate		Certified C	Filing Fee & opy copy is enclosed)	OSCIONA PINE Rec. Certificate of Status Certified Copy (additional Saprais e	
Re Div P.C	AILING ADDRE gistration Section vision of Corporato D. Box 6327	tions		STREET/CO Registration So Division of Co Clifton Buildir	rporations ng	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF QRGANIZATION OF

	(A Florida Limited Liability Company)					
FIRST:	The Articles of Organization were filed on <u>January</u> , 23,2007 and assigned document number <u>L0700008037</u>					
SECOND:	This amendment is submitted to amend the following:					
	Please add:-	<u> </u>				
	KIRIT PATEL as additional MANAG	NG				
	MEMBER with address ! -					
	6168 9th AVE CIRCLE N.E	<del></del>				
	BRADENTON, FL 34212					
	Thank You.					
	· · · · · · · · · · · · · · · · · · ·	20				
	E C R A H	2007 OC   29   AM II: 03				
	ASSI	10CJ 29 AMII				
	TO					
Dated	10/25, 2007.	<b>≓</b> ⊑				
	Sin Sin	ထ်				
	Sheila Palts Signature of a member or authorized representative of a member	_				
	SHEILA PATEL  Typed or printed name of signee	_				

Filing Fee: \$25.00