

#L07000067044

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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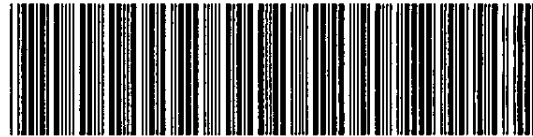
(Business Entity Name)

(Document Number)

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FILED  
12 MAR - 2 PM 4:38  
SECRETARY OF STATE  
PALM BEACH, FLORIDA

K. SALLY  
EXAMINER  
MAR 5 2012

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT:

Susy B Liquors LLC.  
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:

Susy Bogardus  
Name of Person

Susy B Liquors  
Firm/Company

210 West Sugarland Hwy  
Address

Clewiston FL 33440  
City/State and Zip Code

sbogardus@embargo@mail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Susy Bogardus  
Name of Person

at (863) 228-5987  
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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

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

FILED  
12 MAR -2 PM 4:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 2/29/12 and assigned  
Florida document number LD7000067044.

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)

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:

Neville STEVE BOGARDAUS (MER)

New Registered Office Address:

210 West Sugarland Hwy

Enter Florida street address

Clewiston

City

Florida

33440

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.

Neville Bogardaus  
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	Victor L PEREZ	754 MidState Loop Clewiston FL 33440	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Neville Steve Bogardus	210 West Sugarland Hwy Clewiston FL 33440	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

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

Dated February 29, 2012.

\_\_\_\_\_  
Signature of a member or authorized representative of a member  
SUSY BOGARDUS  
\_\_\_\_\_  
Typed or printed name of signee