L08000676010

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(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	#)
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10/25/10--01015--008 **25.00

SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON
OCT 2 6 2010
EXAMINER

COVER LETTER

	istration Section ision of Corporations					
SUBJECT:	LEGO WINERIES LLC					
	Name of Limited Liability Company					
The enclose	Articles of Amendment and fee(s) are submitted for filing.					
Please return	all correspondence concerning this matter to the following:					
	GABRIEL G. GOLDBERG					
	Name of Person					
	LEGO WINERIES LLC					
	Firm/Company					
	19200 SW 106 AVENUE # 29	19200 SW 106 AVENUE # 29				
	Address					
	MIAMI, FLORIDA 33157					
	City/State and Zip Code					
	CFRANCO@LEGOWINERIES.COM					
	E-mail address: (to be used for future annual report notification)					
For further i	formation concerning this matter, please call:					
	CARMEN E. FRANCO at (786) 985-5457					
	Name of Person Area Code & Daytime Telephone Number					
Enclosed is	check for the following amount:					
₹25.00 F	Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified C	of Status &				

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 ORGANIZATION OF

	LEGO WINE	ERIES LLC				
(Name of the Limited (A	Liability Compa Florida Limited I	ny as it now appears	on our records.)			
(*)		successive Company)				
The Articles of Organization for this Limited Li	ability Company	were filed on	08/07/2008	and assigned		
Florida document number L08000076	i010					
This amendment is submitted to amend the follo	owing:					
A. If amending name, enter the new name of	the limited liab	ility company here	:			
	LEGO WINE		•			
The new name must be distinguishable and end wit "L.L.C."	h the words "Limi	ted Liability Compan	y," the designation "L	LC" or the abbreviati	on	
Enter new principal offices address, if applicable:		19200 SW 106 AVENUE # 29				
(Principal office address MUST BE A STREE	T ADDRESS)	MIAMI, FLORIDA 33157				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		11767 SOUTH DIXIE HWY # 253				
		MIAMI, FLORIDA 33156				
	2017	<u>,,,,,</u>			•	
B. If amending the registered agent and/or the new registered of	fice address her	<u>e</u> :	ır records, <u>enter tl</u>	ne name of the ne	<u>w</u>	
Name of New Registered Agent:	ANDRES J.	PERINI				
New Registered Office Address:	9265 SW 13	SW 136 STREET CIRCLE Enter Florida street address				
		MIAMI	, Florida	33176		
		City		Zip Code		
New Registered Agent's Signature, if changing R	egistered Agent:					
I hereby accept the appointment as registered the provisions of all statutes relative to the pr accept the obligations of my position as regis being filed to merely reflect a change in the r company has been notified in writing of this o	roper and completered agent as pegistered office thange.	lete performance of provided for in Chaddress, I hereby designing Registered Agent	f my duties, and I a pten 608, F.S. Oy, 1	m familiar with and This document is ited liability		
	Page 1	of 2		그 중	Ŧ	

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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 Title Name Address **Type of Action** ☐ Add Remove ☐ Add Remove ☐ Add ☐ Remove □Add Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) SEPTEMBER 30 Dated_ Signature of a member or authorized representative of a member GABRIEL G. GOLDBERG Typed or printed name of signee

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Filing Fee: \$25.00