L09000001205

(Requestor's Name)
(Address)
, (Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
, , , ,
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,
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COVER LETTER

TO: Registration Se Division of Co			·	
	XIE MONTGOMERY, LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	Jennifer Greene			
		Name of Person		
•	Southeastern Grocers, LLC	C		
•		Firm/Company	ا دن	:
	8928 Prominence Parkway	, Building 200	SEP	
		Address		
	Jacksonville, FL 32246		——————————————————————————————————————	:
		City/State and Zip Code	*;	J
	jennifergreene@segrocers.o		_	
	E-mail address: (to be used for future annual report noti	fication)	
For further information	concerning this matter, please c	all:		
Jennifer Greene		904 783-5910 at ()		
Name o	of Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for t	he 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

WINN-DIXIE MONTGOMERY, LLC		
(Name of the Limited Liab (A Flori	ility Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L09000001205	Company were filed on 01/06/2009	and assigned
This amendment is submitted to amend the following:	<u> </u>	
A. If amending name, enter the new name of the lir	nited liability company here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		5
(Principal office address MUST BE A STREET ADD	DRESS)	节 连.
		5 CX
		क ाञ्च
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		22
Trading warrest man bearing		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		ter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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 605, 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
SVP	Joseph McKeska	5050 Edgewood Court	
		Jacksonville, FL 32254	🖃 Remove
			□ Change
			_ □ Add
-			□ Remove
			☐ Change
			□ Add
			Remove
			Change
			□ Ad <mark>ū</mark>
			□ Remove
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. Effec	tive date, if other than the date of filing: [Rective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 date. If the date inserted in this block does not meet the applicable statutory filing requirement.	(optional) ys after filing.) Pursuant to 605.0207 (
docur	nent's effective date on the Department of State's records.	its, this date will not be listed as it
	ecord specifies a delayed effective date, but not an effective time, at 12 a 90th day after the record is filed.	2:01 a.m. on the earlier of:
Dated	August 24, 2016.	
	M 82 119	

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Typed or printed name of signee

Filing Fee: \$25.00