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(Address)

(Address)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

FEB 09 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Blue Ocean Wine, 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:

Thomas C. Saunders

Name of Person

Saunders Law Group

Firm/Company

Post Office Box 1279

Address

Bartow, Florida 33831-1279

City/State and Zip Code

marcie@saunders-law.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas C. Saunders

Name of Person

at (863)

533-6200

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

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TALLAHASSEE, FLORIDA

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Blue Ocean Wine, LLC

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TALLAHASSEE, FLORIDA

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	Francesca Andreoni	1942 East Edgewood Drive Lakeland, Florida 33803	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Thomas C. Saunders	480 South Broadway Avenue Bartow, Florida 33830	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<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 7, 2011

Cristian Milani

Signature of member or authorized representative of a member

Cristian Milani

Typed or printed name of signee

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Filing Fee: \$25.00

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