

L10000116761

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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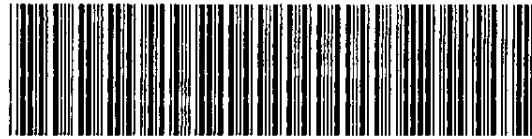
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

MAR 15 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Choice Beverage 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:

Michael J. Dramis

Name of Person

Choice Beverage LLC

Firm/Company

50 NE Dixie Highway Suite A-4

Address

Stuart, Florida 34994

City/State and Zip Code

James_Hage_bmc@yahoo.com

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

For further information concerning this matter, please call:

Michael J. Dramis

Name of Person

at (772)

370-8970

Area Code & Daytime Telephone Number

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TALLAHASSEE, FLORIDA

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**

Choice Beverage LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on November 09, 2010 and assigned Florida document number L10000116761.

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)

Choice Beverage LLC

50 NE Dixie Highway Suite A-4

Stuart, Florida 34994

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Choice Beverage LLC

50 NE Dixie Highway Suite A-4

Stuart, Florida 34994

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:

Michael J. Dramis

New Registered Office Address:

50 NE Dixie Highway Suite A-4

Enter Florida street address

Stuart

Florida

34994

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 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.


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>
CEO	Michael J. Dramis	50 NE Dixie Highway Stuart, Florida 34994 Suite A-4	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
CEO	James D Hage	1605 N.E. Janes Terrace Jensen Beach, Florida 34957	<input type="checkbox"/> Add <input checked="" 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.)

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 11 MAR 14 PM 2:56
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Dated March 8th, 2011.

James D. Hage Michael Dramis
 Signature of a member or authorized representative of a member
James D. Hage Michael Dramis
 Typed or printed name of signee