## 11000140937

| (Requestor's Name)                      |                 |              |  |  |
|---|-----------------|--------------|--|--|
| (Address)                               |                 |              |  |  |
| (Add                                    | lress)          | ٩            |  |  |
| (City                                   | /State/Zip/Phor | ne #)        |  |  |
| PICK-UP                                 | MAIT            | MAIL         |  |  |
| (Business Entity Name)                  |                 |              |  |  |
| (Document Number)                       |                 |              |  |  |
| Certified Copies                        | Certificate     | es of Status |  |  |
| Special Instructions to Filing Officer: |                 |              |  |  |
|   |                 |              |  |  |
| 'SEP 1 9 2012                           |                 |              |  |  |
| L. SELLERS                              |                 |              |  |  |
|   |                 |              |  |  |

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SECRETARY OF STATE TALLAHA9SEE, FLORIDA

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## **COVER LETTER**

| Division of                | f Corporations                               | м.  | 3  |  |  |
|----------------------------|--|---|--|--|--|
| SUBJECT:                   | Future Cella                                 | ar Enterprises LLC  |  |  |  |
| i i                        |  | ted Liability Company   |  |  |  |
| The enclosed Article       | es of Amendment and fee(s) are sub           | omitted for filing.   |  |  |  |
| Please return all con      | respondence concerning this matter           | to the following:   |  |  |  |
|                            |  | Clara Zubiria   | *  |  |  |
|                            |  | Name of Person  |  |  |  |
|                            | Fut  | ure cellar enterprises llc  |  |  |  |
|                            |  | Firm/Company  |  |  |  |
|                            |  | 622 se 20th st  |  |  |  |
|                            |  | Address   | · · · · · · · · · · · · · · · · · · ·  |  |  |
|                            |  | O 1510000   |  |  |  |
|                            | (  | Cape Coral Fl 33990  City/State and Zip Code                        |  |  |  |
|                            | • •  |   |  |  |  |
|                            | E-mail address: (                            | razubirla@hotmail.com<br>to be used for future annual report notifi | cation)  |  |  |
| For further informat       | tion concerning this matter, please of       | eall:   |  |  |  |
|                            | Julio Zubiria                                | at ( 239 )  | 3405216  |  |  |
| N                          | ame of Person                                | Area Code & Daytim  | e Telephone Number   |  |  |
| Enclosed is a check        | for the following amount:                    |   |  |  |  |
| <b>✓</b> \$25.00 Filing Fe | © \$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:

TO:

Registration Section

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

| Future Cellar En  | nterprises LLC  |           |
|---|---|-----------|
| (Name of the Limited Liability Compan<br>(A Florida Limited Li  | y as it now appears on our records.) iability Company)  |           |
| The Articles of Organization for this Limited Liability Company v   |   | ıed       |
| Florida document numberL110001404927  |   |           |
| This amendment is submitted to amend the following:   |   |           |
| A. If amending name, enter the new name of the limited liabil   | <u>llity company here</u> :                             |           |
| The new name must be distinguishable and end with the words "Limite"L.L.C."   | ed Liability Company," the designation "LLC" or the abb | reviation |
| 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 registered agent and/or the new registered office address here |   | he new    |
| Name of New Registered Agent:   | 7 E 2   | • •       |
| New Registered Office Address:  | Enter Florida street address 1                          |           |
| <del></del>   | City , Florida Code                                     |           |
| New Registered Agent's Signature, if changing Registered Agent:   | FLORID  | •         |

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 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 = M<br>MGRM =                              | Managing Member  |   |                |
|--|--|---|----------------|
| <u>Title</u>                                   | Name   | Address   | Type of Action |
| MGR  | Julio Zubiria  | 622 se 20th st<br>Cape Coral Fl 33990             | ✓ Add ☐ Remove |
| MGR_   | Juan Zubiria   | 347 SE 47th st<br>Cape Coral FI 33904             | Add Remove     |
|  |  | Add<br>Remove                                     |                |
|  |  |   | Add Remove     |
|  |  |   | AddRemove      |
| D. If amending any other information, enter of | ter change(s) here: (Attach additional sheets, if nece | Add Remove  |                |
|  |  | or campo(c) across (mass)                         |                |
|  |  |   |                |
| Dated  | 9/13<br>May 7  | 1, 2012.  | <del></del>    |
|  | Signature of   | a member or authorized representative of a member |                |

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Filing Fee: \$25.00