## U3000093131

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B. BOSTICK
DEC 1 1 2013

EXAMINER

## COVER LETTER

TO: Registration Section Division of Corporations		
1		
SUBJECT: BERNIE'S WINE STOP	LLC	
Name of Limited	Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
REPUBLIC ZITUERO		
BERNARD ZITOMER  Name of Person	·	
,		
BERNIE'S WINE STOP, LLC	<u> </u>	
гипсоправу		
1080 S. EDGEWOOD AVE.	#8	
Address	<b>D</b> . 63	
T	ZAIS DEC -9 PA 5: 00	
JACKSONVILLE, FL 32205 City/State and Zip Code		
BERNIE CLUB @ AOL. COM  E-mail address: (to be used for future annual report notification		
•		
For further information concerning this matter, plea	se call:	
BERNARD ZITOMER at (	904 , 629-0601	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301	,	
Enclosed is a check for the following amo	unt:	
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy	

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company:BERNIE	'S WINE STOP, LLC
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	1080 S. EDGEWOOD AVE.#8
	JACKSONVIlle, FL 32205
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1080 S. EDGEWOOD AVE, #8
	JACKSONVIlle, FL 32205
4/11/13	L 13000053937
	. Document number
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:
Registered Agent:	MCBURNEY, CHARLES W, JR.
Registered Office Address:	76 S. LAURA ST. STE 590
	JACKSONVIlle, FL 32202
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	Registered Office address:
NEW Registered Agent:	BERNARD ZITOMER
NEW Registered Office Address:	1080 S. EDGEWOOD AVE. #8
(MUST BE FLORIDA STREET ADDRESS)	JACKSONVIlle, FL 32205
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the bus iness office of the registered agent will be identically company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member  BERNARD J. Z / TOMER  Printed or typed name of signee  I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the project of the provisions of all statutes relative to the project of the provisions of all statutes relative to the project of the provisions of all statutes relative to the project of the provisions of all statutes relative to the project of the provisions of all statutes relative to the project of the provisions of all statutes relative to the project of the provisions of all statutes relative to the project of the provisions of all statutes relative to the project of the provisions of all statutes relative to the project of the provisions of all statutes relative to the project of the provisions of all statutes relative to the project of the provisions of all statutes relative to the project of the provisions of all statutes relative to the project of the provisions of all statutes relative to the project of the provisions of all statutes relative to the provisions of all statutes relative to the project of the provisions of all statutes relative to the project of the provisions of all statutes relative to the project of the provisions of all statutes relative to the provisions of the provisions of all statutes relative to the provisions of all statutes relative to the provisions of all statutes relative to	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote of a provided in the articles of organization or
Chapter 808, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	ely reflect a change in the registered office has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent