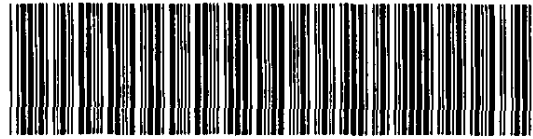


L13000058287

(Requestor's Name)



100250753171

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

08/19/13--01019--000 **30.00

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FLORIDA

J. SAULSBERRY
EXAMINER
AUG 21 2013

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Forza Wine Imports 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:

Frank Vincent Esposito

Name of Person

Forza Wine Imports LLC

Firm/Company

322 E Central Blvd #711

Address

Orlando, FL 32801

City/State and Zip Code

forzawineimports@gmail.com

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

For further information concerning this matter, please call:

Frank Esposito

Name of Person

407 222-1162

at ()

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Forza Wine Imports 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 April 22, 2013 and assigned
Florida document number L13000058287.

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)

11298 Boggy Creek Road

Unit #109

Orlando, FL 32824

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

322 E Central Blvd

Unit #711

Orlando, FL 32801

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: Frank Vincent Esposito

New Registered Office Address: 322 E Central Blvd Unit #711
Enter Florida street address

Orlando, Florida 32801
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

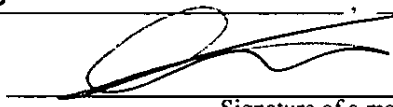
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGMR	Frank Esposito	322 E Central Blvd	<input checked="" type="checkbox"/> Add
		Unit #711	<input type="checkbox"/> Remove
		Orlando, FL 32801	
MGMR	Anthony Esposito	1213 Belmont Dr	<input type="checkbox"/> Add
		Orlando, FL 32806	<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

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CLERK OF DISTRICT COURT
JULIA A. HARRIS

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated August 15, 2013



Signature of a member or authorized representative of a member

Anthony Esposito

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
2013 AUG 19 AM 8:55
CLERK OF STATE
TALLAHASSEE, FLORIDA