

L130000084262

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

SEP 27 2013

A. LUNT

Office Use Only



300249823883

09/25/13--01005--013 **25.00

CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

2013 SEP 25 PM 2:22

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Moonshiners 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:

Winnie DeGaglia
Name of Person

Moonshiners LLC
Firm/Company

3134 NW 68th Ave
Address

Gainesville, FL 32653
City/State and Zip Code

Winnie DeGaglia@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Winnie DeGaglia at (352) 283-2103
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

2013 SEP 25 PM 2:22
TALLAHASSEE, FL 32301

FILED

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

Moonshiners, 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 6-11-2013 and assigned
Florida document number L13000084262

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

Florida

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>
MGRM	Joseph Lombardi	3134 NW 68 th Ave	<input type="checkbox"/> Add
		Gainesville FL 32653	<input checked="" type="checkbox"/> Remove
MGRM	Windie DeGaglia	3134 NW 68 th Ave	<input checked="" type="checkbox"/> Add
		Gainesville FL	<input type="checkbox"/> Remove
		32653	
			<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

2013 SEP 26 PM 2:22
REC'D CIVIL RIGHTS DIVISION
FALLS CHURCH, VA

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

Dated September 23, 2013

Winnie DeGaglia

Signature of a member or authorized representative of a member

Winnie DeGaglia

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

RECEIVED
TALLAHASSEE, FLORIDA

2013 SEP 25 PM 2:22

FILED