L14000072547

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	: #)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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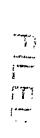
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COVER LETTER

TO: Registration Se Division of Cor					
SUBJECT: Local	Liquor LLC				
SUBJECT:		ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please return all correspondence	ondence concerning this matter	to the following:			
	Vladimir Kor	chagin			
		Name of Person			
	Local Liquor	LLC			
		Firm/Company			
	3076 Dyer B	llvd			
		Address			
	Kissimmee,	FI 34741		2014	
	- 1 1- 10000 01-	City/State and Zip Code		2014 HAY 27	
	orlando10369@hc	DIMAII.COM to be used for future annual report notifica	tion)	27	poster. (1842-1871)
For further information e	oncerning this matter, please ex	alt:		3	
vladimir koı	rchagin	407 690-03	02		()
-	f Person	at ()	elephone Number	क्रिस्त 🙉	
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	☐ S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section 50	of Status &	
Registr	ING ADDRESS: ration Section on of Corporations	STREET/COURIER Registration Section Division of Corporation			

P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability C</u> (A Florida Lir	company as it now appears on our records.)	
The Articles of Organization for this Limited Liability Com Florida document number L14000072547	pany were filed on 05/05/2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
The new name must be distinguishable and end with the words "Limite	d 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 ADDRES		Z ₁ Z ₁
Enter new mailing address, if applicable:	3076 Dyer Blvd	
(Mailing address MAY BE A POST OFFICE BOX)	Kissimmee, FI 34741	
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		ter the namer of the nev
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:

Local Liquor LLC

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 605, 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 Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u> AMBR	Name vladimir korchagin	Address 3076 Dyer Blvd	Type of Action
		Kissimme, FI 34741	■ Add
			□ Add
			Remove
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			27 Add
			Add
			☐ Remove
***************************************			□ Add
			U Kemove

Effective date, if other than the date of filing: The effective date must be specific, cannot be prior to date of receipt or filed date.	(optional) and cannot be more than 90 days after
the date this document is filed by the Florida Department of State)	
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	presentative of a member

Page 3 of 3

Filing Fee: \$25.00