

#14000163664

10/24/2014 16:23

FAX 813 273 4256

P.001/002

Division of Corporations

Page 1 of 2

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000249696 3)))



H140002496963ABCB

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : MACFARLANE FERGUSON & MCMULLEN

Account Number : 076077001654

Phone : (813) 273-4229

Fax Number : (813) 273-4396

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: far_tampa@macfar.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
DEBINE BREWING COMPANY, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

RECEIVED

14 OCT 24 PM 12:00

DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

K. SALY
EXAMINER

OCT 27 2014

Electronic Filing Menu

Corporate Filing Menu

Help

(((H14000249696 3)))

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

DEBINE BREWING COMPANY, 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 October 20, 2014 and assigned
Florida document number L14000163664

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

DE BINE BREWING COMPANY, LLC

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)

1611 Sparkling CourtDunedin, FL 34698

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1611 Sparkling CourtDunedin, FL 34698

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 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

Page 1 of 3

(((H14000249696 3)))

(((H14000249696 3)))
 If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Dana E. Nichols	1611 Sparkling Court	☐ Add
		Dunedin, FL 34698 (address change)	☐ Remove
MGR	Vincent A. Megale	555 Frederica Lane	☐ Add
		Dunedin, FL 34698	☒ Remove
MGR	Vincent A. Megale, Jr.	1031 NE 9th Street	☒ Add
		Ocala, FL 34470	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

FILED
 2014 OCT 24 AM 9:22
 CLERK OF STATE
 TALLAHASSEE, FL 32301

(((H14000249696 3)))
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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

Dated October 24, 2014



Signature of a member or authorized representative of a member

Jamil G. Daoud, Esquire

Typed or printed name of signee

Page 3 of 3
Filing Fee: \$25.00

FILED
2014 OCT 24 AM 9:23
CLERK OF STATE
TALLAHASSEE, FLORIDA

(((H14000249696 3)))