

L15000050084

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

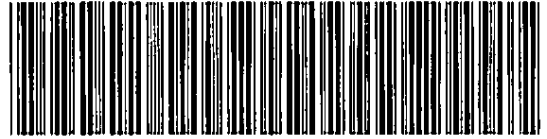
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700349710217

08/07/20--01018--007 **25.00

FILED
2020 AUG -7 AM 7:06
SECRETARY OF STATE
TALLAHASSEE, FL

D. BRUCE
SEP 28 2020

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LIST DISTILLERY, 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:

Michael A. Scott, Esq.

Name of Person

The Dorsey Law Firm, PLC

Firm/Company

10181 Six Mile Cypress Parkway, Suite C

Address

Fort Myers, FL 33966

City/State and Zip Code

Mike@dorseylaw.com

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

For further information concerning this matter, please call:

Michael A Scott

239

418-0169

at (_____) _____

Name of Person

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECRETARY OF STATE
TALLAHASSEE, FL

2020 AUG -7 AM 7:06

FILED

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

List Distillery, 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 03/19/2015 and assigned
Florida document number L15000050084.

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 contain 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)

FILED
2020 AUG -7 AM 7:06
SEAL
TALLAHASSEE, FL

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

in amending Authorized person(s) authorized to manage, enter the title, name, and address of each person 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	LIST, THOMAS	9431 SUNSET HARBOR LANE	<input type="checkbox"/> Add
		#152	<input type="checkbox"/> Remove
		FORT MYERS, FL 33919	<input checked="" type="checkbox"/> Change
MGR	LIST, RENATE	9431 SUNSET HARBOR LANE	<input type="checkbox"/> Add
		#152	<input type="checkbox"/> Remove
		FORT MYERS, FL 33919	<input checked="" type="checkbox"/> Change
MGR	FAHNEMANN, THOMAS	5664 YARDARM CT	<input type="checkbox"/> Add
		CAPE CORAL, FL 33914	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	FAHNEMANN, TANIA	5664 YARDARM CT	<input type="checkbox"/> Add
		CAPE CORAL, FL 33914	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	OLIVER, ANDREW	32 WORNAL PARK	<input checked="" type="checkbox"/> Add
		WORMINGHALL	<input type="checkbox"/> Remove
		HP18 9PH UNITED KINGDOM	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2020 AUG -7 AM 7:06
 DECEMBER 1, 2019
 TALLAHASSEE, FL

FILED

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

SECRET

2020 AUG -7 AM 7:06

SECRET
TALLAHASSEE, FL

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 7/30/2020

- DocuSigned by:

Thomas Fahrman

Signature of a member or authorized representative of a member

Thomas Fahnemann

Typed or printed name of signee

Filing Fee: \$25.00