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L.W.	; T	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SOUTHERN WINE & SPIRITS OF LOUISIANA, LL

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COVER LETTER

TO: Registration S Division of Co				
SHRIPOT: Southern	Wine & Spirits of Louisiana,	LLC		
Sometice:		nited Liability Company		
•				
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
Please return all correso	ondence concerning this matter	to the following:		
	Mantal Manager			
•	Daniel Connelly	Name of Person		
	·			
	Hogan Lovells US LLP	Firm/Company		
		THE Company		
	100 International Drive,			
		Address		
	Baltimore, MD 21202			
		City/State and Zip Code		
	daniel.connelly@hoganic	ovells.com to be used for future annual report notif	(cation)	
_ a		•	realition y	
For further information	concerning this matter, please o	all:		
Daniel Connelly		at (410) 659-5073	34. 2	
Name	of Person	Area Code Daytime	Telephone Number	
				[]
Enclosed is a check for	the following amount:		Open Open Priori	-
\$25.00 Filing Fee	□ \$30.39 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status Cortified Copy (additional copy)	
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MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32714 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Southern Wine & Spirits of Louisiana (Name of the Limited Lin (A Fig.	, LLC ability Company as it new appears on orida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liabilit	ty Company were filed on 05/13/2	2016 and assigned
Florida document number L16000095578		
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
Southern Glazer's Wine and Spirits of Louisiana II.		
The new name must be distinguishable and contain the words "	Limited Liability Company," the design	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD		
The second of th		602
		-
Enter new mailing address, if applicable:		(2)
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
	***************************************	5
B. If amending the registered agent and/or re registered agent and/or the new registered office a Name of New Registered Agent:	gistered office address on our ddress here:	records, enter the name of the new
New Registered Office Address:	Enter Florida su	eet address
•		
_	City	, Florida Zin Code
New Registered Agent's Signature, if changing Registe	red Agent:	
I hereby accept the appointment as registered ages provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the registe campany has been notified in writing of this change	nt and agree to act in this capac I complete performance of my d I agent as provided for in Chapt ered office address, I hereby co	uties, and I am familiar with and er 605, F.S. Or, if this document is
	If Changing Registered Agent, S	unature of New Registered Agent

If 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 Type of Action Address Title Name _D Add _□ Remove ___ Change _D Add __ Remove _ Change _D Add _ Remove _ Change _ 🗖 Add Remiore 6 JURE 2 3dd .□ Remove ☐ Change _D Add ☐ Remove

_____ Change

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