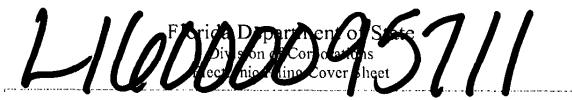
6/20/2016 10:10:08 AM From: To: 8506176383(1/5)



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.

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
Fax Number : (850) 278-5369 Fax Number : (850)878-5368

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

Email Address:

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

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$60.00

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MH 27 2013

6/20/2016 10:10:08 AM From: To: 8506176383(2/5)

COVER LETTER

TO: Registration	n Section Corporations		
SUBJECT: Southe	m Wine & Spirits of Pennsylva	inia Holdings, LLC	
		nited Liability Company	
		•	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Daniel Connelly		
		Name of Person	2016 JUL 20
	Hogan Lovelis US LLP		III 20
		Firm/Company	144
	100 International Drive,	Suite 2000	
		Address	8
	Baltimore, MD 21202		April 1
		City/State and Zip Code	
	daniel.connelly@hoganic	ovells.com (to be used for future annual report notifi	ication)
For further information	n concerning this matter, please o		(Cadon)
To two diet magnitude	to concerning this matter, prease of		
Daniel Connelly		at (<u>410) 659-5073</u>	
Nan	e of Person	Area Code Daytime	Telephone Number
Enclosed is a check fa	τ the following amount:		
□ \$25.00 Filing Fee	-	1 \$55 (9) William Roo &	2 6 60 00 Filing Fue
323.00 Fining 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:

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Registration Section
Division of Corporations
P.O. Box 6327
Tallahassec, F1, 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Cliffon Building 2661 Executive Center Circle Tallahassee, FL 32301 6/20/2016 10:10:08 AM From: To: 8506176383(3/5)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Southern Wine & Spirits of Pennsyl	Ivania Holdings. LLC		
(Name of the Limited (A	Liability Company as it now appears on o Florida Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liabi	ility Company were filed on 05/13/2	2016	_ and assigned
Florida document number L16000095711			
This amendment is submitted to amend the following	ing:		
A. If amending name, enter the new name of th	e limited liability company here:		
Southern Glazer's Wine and Spirits of Pennsylval			
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designs	ttion "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable	e:		
(Principal office address MUST RE A STREET A	ADDRESS)		· · · · · · · · · · · · · · · · · · ·
		<u> </u>	
Enter new mailing address, if applicable:		1> 17.	<u> </u>
(Mailing address MAY BE A POST OFFICE BO	<u></u>	374 mm 1 (10 mm)	Constitution and the same of t
		€/35 min 1713 min 1	O ३०४०
			>
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our	records, enter-th	e name of the nev
registered agent and/or the new registered office	anduress nere:	707 P	05
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida si	reet address	
_		Florida _	
	City		Zıp Çode

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

6/20/2016 10:10:08 AM From: To: 8506176383(4/5)

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

<u>Title</u>	Name	Address	Type of Action
			Add
			☐ Remave
			Change
			Remove
			☐ Change
		Add	
			Remove
			Change
			Add Remove
		ATASSE	~
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		REC Des	Remove
			🗖 Change
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6/20/2016 10:10:08 AM From: To: 8506176383(5/5)

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Effective date, if othe fan effective date is listed, Note; If the date inserted document's effective da	d in this block does	not meet the applic	able statutory filit	nore than 90 days after ny requirements, th	r filing.) Purs is date will	suant to 60 not be lis	15,0207 (ted as t
ne record specifies The 90th day afte	a delayed effect or the record is f	ive date, but no iled.	ot an effective	time, at 12:01	a.m. on t	he earl	ier of:
Dated June (<u>C</u>		\				
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		e of a member or auth					

Page 3 of 3

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