## L/6000/195/3

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT M	AIL
(Business Entity Name)	<del></del>
(,	
(Document Number)	
Certified Copies Certificates of Status _	
Special Instructions to Filing Officer:	
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Office Use Only



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2017 JAN 25 PH 2: 44
SLUGETARY OF STATE

K. SALY JAN 27 2017



December 30, 2016

WOLFPACK WINE AND SPIRITS EDWARD FARA 6100 SW 93 CT. MIAMI, FL 33173

SUBJECT: PROXIMO GROUP LLC

Ref. Number: L16000119513



We have received your document for PROXIMO GROUP LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 316A00027772

## **COVER LETTER**

TO: Registration Section Division of Corporation	on Pations		
SUBJECT:	PROXII Name of Limit	m D GROUP ed Liability Company	LIC_
	nendment and fee(s) are subm		
Please return all corresponde	ence concerning this matter to	o the following:	
	ED	WARD FA	RA
	^	MO GROUP Firm/Company	
		S.W. Address	
		Address	
	Min	Mi FL. 3 City/State and Zip Code	13173
	EDDÍE O WO	OLFPACKWINEAN  o be used for future annual repo	DSPIRITS.COM
For further information cond	cerning this matter, please ca	N:	
EDWARD	FARA	at (305)9	87 - 1443 aytime Telephone Number
Name of Po	rson	Area Code D	aytime Telephone Number
Enclosed is a check for the f	ollowing amount:		
\$25.00 Filing Fee  SEE ATTACHED  NOTE	□ \$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/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

ARTICLES OF OF	E 2011	ED
(Name of the Limited Liability Compan (A Florida Limited Li	MO GROUP ALLANDSEE OF STABLE OF STAB	1 2:44
The Articles of Organization for this Limited Liability Company velocida document number	were filed on $\frac{6/21/16}{}$ and assign	ned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil  WOLFPACK: WINE AND  The new name must be distinguishable and contain the words "Limited Liability  Enter new principal offices address, if applicable:	SPIRITS LLC, ity Company," the designation "L.L.C" or the abbreviation "L.L.C.	<u> </u>
Principal office address MUST BE A STREET ADDRESS)	6100 S.W. 93cT. MIAMI, FL. 33173	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	6100 S.W. 93 ct MIAMI, FL. 33173	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		the new
Name of New Registered Agent:		

## New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

, Florida <sub>-</sub>

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 = AMBR =	Manager Authorized Member		FILED	
<u>Title</u>	<u>Name</u>	<u>Address</u>	2011 JAN 25 PH 2:	Type of Action
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If an effective de Note: If the c	te, if other than the date of filing:	05.0207 ( sted as ti
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear day after the record is filed.	lier of:
Dated	JAN 18TH. 2017.	
_	Signature of a member or <u>authorized representative</u> of a member	

Page 3 of 3

Filing Fee: \$25.00