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(Requ	uestor's Name)	
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COVER LETTER

Division of Corpo	rations		
SUBJECT: Pain	+ Outside the Wines, LLC		
· · · · · · · · · · · · · · · · · · ·	Name of Limited Liability Company		
The enclosed Articles of An	nendment and fee(s) are submitted for filing.		
Please return all corresponde	ence concerning this matter to the following:		
	Nicole Askew		
	Name of Person		
	Paint Outside the Wines, LLC Firm/Company		
	2708 Santa Barbara BIVS SAC 149		
	Address		
	Cape Coral, FV 33914 City/State and Zip Code	2017 F	eng
-	Cape Coral, FV 33914 City/State and Zip Code Masterpie Ce im ixers cape Coral @ a mail. c E-mail address: (to be used for future annual report notification)	EB 21	
For further information conc	eerning this matter, please call:		
Nicole AS		7 2: 4 0	
Enclosed is a check for the f	ollowing amount:		
□ \$25.00 Filing Fee	Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certificate of Status	Filing Fee, icate of Status & ied Copy onal copy is enclosed)	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

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

PAINT 0 (Name of the Limit	ntside ted Liability Company	he WI	nes LLC)			
		• • •					•
The Articles of Organization for this Limited Li	ability Company we	ere filed on _	10/28/2	016	and	assigned	`
Florida document number	990960						
This amendment is submitted to amend the follow	wing:						
A. If amending name, enter the new name of	the limited liabilit	y company h	ere:				
The new name must be distinguishable and contain the wa	ords "Limited Liability	Company," the	designation "LLC"	or the abb	reviation '	"L.L.C."	
Enter new principal offices address, if applica	ıble:						
(Principal office address MUST BE A STREE	T ADDRESS)			<u>چ</u> ار .	20		
				250	17	- Control of the Cont	
				25	93	(C)MARCAN	
Enter new mailing address, if applicable:				(S) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	21		
(Mailing address MAY BE A POST OFFICE I	<u>BOX)</u> _			77	Ū	Fil	<u>.</u>
				E E E	?		
				∵; }	0.0		
B. If amending the registered agent and/oregistered agent and/or the new registered of	fice address here:		·				
Name of New Registered Agent:	NICOL	e As.	Kew Santa Ba			. 	
New Registered Office Address:	3 24	2708	Santa Ba	rbar	a Blu	ids #	149
	Cape Cor	Enter Flo	rida street address		20-	,	
	Cape Cor	الم	, Flo	rida	3391	14	
	•	City			Zip Cod	1e	

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

MGR = Ma $AMBR = Au$	anager athorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Karla J Segura	Address a Galindo 904 SE 32 nd 54	D Add
		Cape Coral, Fl 3390	24 PRemove
			Change
MGR	Scott Zeiter	904 SE 32th St Cape Coral, FL 33904	
		Cape Coral, FL 33904	Remove
			Change
A MBR	Nicole Askew	2632 Sw 94h P1	Add
		26325w 94h Pl Cape Coral, FL 33924	✓ □ Remove
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		-
Effective date, if other than the date of filing:(If an effective date is listed, the date must be specific and cannot be prior to date of filing.	(optional)	5 0207
Note: If the date inserted in this block does not meet the applicable statutory	y filing requirements, this date will not be list	ted as
document's effective date on the Department of State's records.		
the record specifies a delayed effective date, but not an effect The 90th day after the record is filed.	tive time, at 12:01 a.m. on the earli	er of
Dated 2/15 2017		
Dated $\frac{\partial/15}{\partial x^2}$, $\frac{\partial \partial x}{\partial x^2}$.		
<u> </u>		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00