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COVER LETTER

SUBJECT: MC Wine and Beer, 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:
Deanna J. Carr Name of Person
Mc Wine and Beer, LLC Firm/Company
103 West Main St.
Inverness/FL 34450 Chy/State and Zip Code
E-mail address (to be used for future annual report notification)
For further information concerning this matter, please call:
William G. Carr at (352) 212 - 9326 Name of Person Area Code Day time Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status □ Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MC Wine (Name of the Limited L.)	and Beer, LLC lability Company)	records.)
The Articles of Organization for this Limited Liabil Florida document number	ity Company were filed on2	
This amendment is submitted to amend the following	g:	
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 designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	: 	SE (7AL)
(Principal office address MUST BE A STREET A	DDRESS)	MAR.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u></u>	ARY OF STATE ARY OF STATE ORIDA -) PM 7: 47
B. If amending the registered agent and/or registered agent and/or the new registered office		ecords, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	address
	Ciry	Florida Zip Code
	= w	

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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Deanna Jo Corr	103 W. Main St.	[X Add
		Inverness, FL 34450	Remove
			Change
AMBR	AMBR Hunter C Mclondon- Johnson	103 W. Main St	Add
<i>) د</i>	JONNSOK	Inversess, FL 34450	
			Change
			🗆 Add
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(If an e Note	tive date, if other than the date of filing: 2-28-20)8 (optional) (Rective 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 1f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ment's effective date on the Department of State's records.	i 605.02 : listed i	07 (3)(b) as the
) Th	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the elegation of the record is filed.	arlier	of:
	February 26, 2018		
Dated			
		_	
	Signature of a member or authorized representative of a member		
	Hunter Johnson		

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Filing Fee: \$25.00