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## COVER LETTER

TO: Registration Se Division of Cor		-				
	V365 W	/INERY, LLC		j.		
SUBJECT:	Name of Lim	sited Liability Company		<del></del>		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
		Vinanta Mundra				
		Name of Person				
		V365 WINERY, LLC				
		Firm/Company			رن دع	
	3814 Gunn Hwy, Suite A			:	\$21 JUN -7	• • •
		Address		: <sup>17</sup> ,	=	• •
		Tampa, FL 33618			~; —	
		City/State and Zip Code		: 1 N	Pii 1: 92	
		inanta@pv365winery.com			<u></u>	
		to be used for future annual repo	ort notification)		rG	
For further information c	oncerning this matter, please c	all:				
Vinanta Mundra		813 at ()	857-7334			
Name o	f Person	at () Area Code	Daytime Telepho	ne Number		
Enclosed is a check for the	ne following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose		\$60.00 Filing Fed Certificate of Standard Certified Copy (additional copy is e	atus &	
Mailing Addres		<u>Street Addr</u> Registratio				
Registration S Division of C		-	on Section of Corporation	ıs		
P.O. Box 632 Tallahassee, 1			e of Tallahas: Ionroe Street.			
ramanassee.	L J4J14	2410 IN. IV	ionioc attect.	, suite of the		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

V365 WINER	IY, LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appear Liability Company)	s on our records.)	
he Articles of Organization for this Limited Liability Company	were filed on	05/05/2020	and assigned
lorida document number L20000121609			
nis amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited liab	ility company he	<u>re</u> :	
PV365 WI	NERY, LLC		232
e new name must be distinguishable and contain the words "Limited Liabil	lity Company," the de	signation "LLC" or th	e abbréviation "L.L.C."
nter new principal offices address, if applicable:	3814 Gunn Hwy		= 13
rincipal office address MUST BE A STREET ADDRESS)	Suite A		7
	Tampa, FL 3361	8	
		- - -	道 重
nter new mailing address, if applicable:	3814 Gunn Hwy	·	D2
failing address MAY BE A POST OFFICE BOX)	Suite A		
	Tampa, FL 3361	8	
If amending the registered agent and/or registered office a ent and/or the new registered office address here:  Name of New Registered Agent:	address on our re	cords, <u>enter the n</u>	ame of the new regist
New Registered Office Address:	Enter Flori	da street address	
		, Florida	
	City	,,,,,,,,,,,,,,,,,,,,,,,,,,,	Zip Code

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 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>	<u>Name</u>	Address	Type of Action
			□ Add
			Remove
			☐Remove
			See ⊒ □Add
		<del></del>	Remove
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		<del></del>	<del></del>	
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ote: If the date inserted in th	the date of filing: must be specific and cannot be prior to block does not meet the applicate Department of State's records.			
2 32 2 4 311 11				
record specifies a delayed efficient is filed.	ective date, but not an effective tir	ne, at 12:01 a.m. on the earli	er of: (b) The 90th day after	r th
June 3 sted	2021			
	1//1/1/1/	///		
	Signature of a member of author	rized representative of a member	<u></u>	

Filing Fee: \$25.00