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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

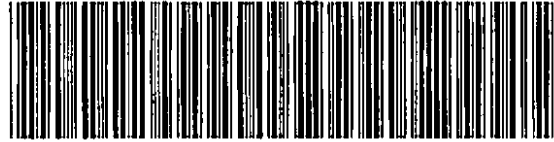
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

2022 OCT 13 AM 8:00

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: PREMIUM PREFERRED SPIRITS, 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:

**William Clark**

Name of Person

**Premium Preferred Spirits LLC**

Firm/Company

**9424 Baymeadows Rd Suite 250**

Address

**Jacksonville, FL 32256**

City/State and Zip Code

**premiumspiritsllc@gmail.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**William Clark**

Name of Person

at ( **770** ) **8735786**

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing 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:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2022 AUG 13 PM 4:36

August 15, 2022

WILLIAM CLARK  
9424 BAYMEADOWS RD  
SUITE 250  
JACKSONVILLE, FL 32256

SUBJECT: PREMIUM PREFERRED SPIRITS, LLC  
Rei. Number: L22000196355

We have received your document for PREMIUM PREFERRED SPIRITS, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

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) 245-6052.

Neysa Culligan  
Regulatory Specialist III

Letter Number: 822A00018168

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**

2022 OCT 13 AM 8:00

**PREMIUM PREFERRED SPIRITS, LLC**

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

SECRETARY OF STATE  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 4/25/20 and assigned  
Florida document number L22000196355.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

**PREMIUM PREFERRED SPIRITS, LLC**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

9424 Baymeadows Rd Suite 250

(Principal office address MUST BE A STREET ADDRESS)

Jacksonville, FL 32256

Enter new mailing address, if applicable:

9424 Baymeadows Rd Suite 250

(Mailing address MAY BE A POST OFFICE BOX)

Jacksonville, FL 32256

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

WILLIAM J CLARK ENTERPRISES LLC

New Registered Office Address:

9424 Baymeadows Rd Suite 250

*Enter Florida street address*

Jacksonville

*City*

Florida 32256

*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 Changing Registered Agent, Signature of New Registered Agent**

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>	<u>Address</u>	<u>Type of Action</u>
MGR	WILLIAM CLARK	#1209 2285 KINGSLEY AVE SUITE A	<input type="checkbox"/> Add
		ORANGE PARK, FL 32073	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	WILLIAM CLARK	9424 Baymeadows Rd Suite 250	<input checked="" type="checkbox"/> Add
		JACKSONVILLE, FL 32256	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

The name "PREMIUM PREFERRED SPIRITS, LLC" should be updated to

PREMIUM PREFERRED SPIRITS, LLC as it was incorrectly input and misspelled during online registration.

Address should be updated from: #1209 2285 KINGSLEY AVE SUITE A ORANGE PARK, FL 32073

to: 9424 Baymeadows Rd Suite 250 JACKSONVILLE, FL 32256

FILED  
2022 OCT 13 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FL

E. Effective date, if other than the date of filing: 04/25/2022 (optional)

(If an effective 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 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 05/30

2022

  
Signature of a member or authorized representative of a member

William Clark

Typed or printed name of signer

Filing Fee: \$25.00