

9/12/24 7:12 PM

Division of Corporations

L24000270736351

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H24000270736 3)))



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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : NEW START BUSINESS SOLUTIONS INC
Account Number : I20130000079
Phone : (305)804-1047
Fax Number : (866)353-4403

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: PMADUENO@BODEGASIMPORTS.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
WINESCO DISTRIBUTORS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

K. SALY

AUG 14 2024

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H24000270736 3)))

WINESCO DISTRIBUTORS LLC

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

The Articles of Organization for this Limited Liability Company were filed on 05/20/2024 and assigned
Florida document number 1,24000234351

This amendment is submitted to amend the following:

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 designation "LLC," or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

10171 NW 58 ST

UNIT 9

DORAL, FL 33178

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

10171 NW 58 ST

UNIT 9

DORAL, FL 33178

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: PATRICIA MADUENO

New Registered Office Address: 10171 NW 58 ST UNIT 9

Enter Florida street address

DORAL

Florida 33178

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.

Patricia Madueno
If Changing Registered Agent, Signature of New Registered Agent

FILED
2024 AUG 13 AM 12:15
TALLAHASSEE, FLORIDA
SUNBIZ LLC

(((H24000270736 3)))

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	MARIANA P BLACK GUERRA	210 SEA VIEW DRIVE - 507	☐ Add
		KEY BISCAYNE, FL 33149	☒ Remove
			☐ Change
MGR	LUIS A GUERRA	10171 NW 58 ST UNIT 9	☒ Add
		DORAL, FL 33178	☐ Remove
			☐ Change
MGR	PATRICIA MADUENO	10171 NW 58 ST UNIT 9	☐ Add
		DORAL, FL 33178	☐ Remove
			☒ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

2024 AUG 13 AM 2:15
FILED
CLERK OF CIRCUIT COURT
FLORIDA
TALLAHASSEE

((H24000270736 3)))

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

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2024 AUG 13 AM 2:15
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

F. Effective date, if other than the date of filing: 08/12/2024

— (0922355412)

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 AUGUST 12

2024

Signature of a member or authorized representative of a member

PATRICIA MADUENO

Typed or printed name of signee

Filing Fee: \$25.00