2001 UNIFORM BUSINESS REPORT (UBR) **FILED** Feb 26, 2001 08:00 AM L97000001198 DOCUMENT # 1. Entity Name **Secretary of State** TERROIR BRANDS, L.C. Principal Place of Business Mailing Address 10801-F ENDEAVOUR WAY 10801-F ENDEAVOUR WAY FL LARGO 337771671 337771671 2. Principal Place of Business 3. Mailing Address 2009 N. 22ND STREET 2009 N. 22ND STREET Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3475369 TAMPA TAMPA Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired 33675 33675 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SONGY ANTOINE SONGY ANTOINE Street Address (P.O. Box Number is Not Acceptable) 1520 LOCK MEADE PLACE 135 LARGS COURT OLDSMAR FLSUITE 304 346775121 US Zip Code City DUNEDIN 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 02/26/2001 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State MANAGING MEMBERS/MEMBERS 9. 10. ADDITIONS/CHANGES X Change TITLE MGR ☐ Delete TITLE MGR ☐ Addition NAME SONGY ANTOINE P NAME SONGY ANTOINE STREET ADDRESS 1520 LOCK MEADE PLACE STREET ADDRESS 135 LARGS COURT CITY-ST-ZIP FL 346775121 OLDSMAR CITY-ST-ZIP DUNEDIN \mathbf{FL} 34678 ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

02/26/2001

Daytime Phone #

Antoine P Songy

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

CR2E083 (11/00)