## M07000004/82

(Requestor's Name)			
(Address)			
(Address)			
,			
(City/State/Zip/Phone #)			
(Oity/State/Zip/Filone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
(Locality)			
Certified Copies Certificates of Status			
Certified Copies Certificates of Status			
-			
Special Instructions to Filing Officer:			
mor-4182 LUNT			
A. LUNT			
MAR 1 1 2009			
·			
EXAMINER			



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01/26/09--01026--016 \*\*35.00

FILED
2009 MAR 10 PM 12: 20
SECRETARY OF STATE

Office Use Only

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

	D L Artisan Wine Company I I	C ·		
SUBJECT: RDJ Artisan Wine Company LLC (Name of Corporation)				
DOCUMENT NU	MBER: 200608710165			
The enclosed State	ment of Change of Registered Office/	Agent and fee are submitted for filing.		
Please return all co	rrespondence concerning this matter t	o the following:		
	Eva Bedolla			
	(Name of Cont	act Person)		
	Winecompliance.com (Firm/Con	nany)		
	(Time Con	·puny)		
<u>1</u>	45 Legacy Court (Addre			
	(Addre	SS)		
•	lapa, CA 94559	•		
_	(City/State and	Zip Code)		
For further informa	ation concerning this matter, please ca	11:		
Eva Bedolla		at ( 707 ) 252-4725 (Area Code & Daytime Telephone Number)		
(Na	ime of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a \$35.0	00 check made payable to the Departm	ent of State.		
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		
		Tallahassee, FL 32301		



February 4, 2009

EVA BEDOLLA 145 LEGACY COURT NAPA, CA 94559

SUBJECT: RDJ ARTISAN WINE COMPANY LLC

Ref. Number: M07000004182

We have received your document for RDJ ARTISAN WINE COMPANY LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6094.

Letter Number: 209A00004000

Agnes Lunt Regulatory Specialist II

## **COVER LETTER**

TO: Registration Sec Division of Corp				
SUBJECT: RDS A	Artsan Wine (Name of Lim	ampany also RDJ Arh nited Liability Company)	<u>san</u> Win	ie Co
Dear Sir or Madam:				
The enclosed Registere	d Agent/Registered Office	Change and fee(s) are submitted for filing	<b>;.</b>	
Please return all corresp	oondence concerning this n	natter to the following:		
Wine Com	Name of Person)  Plance. Con Firm/Company)  Lacy Ct  (Address)  Cut a 4		2009 HAR 10 PM 12: 20 SECRETARY OF STATE TALLAHASSEE, FLORIDA	FILED
·	concerning this matter, ple		MC 13	
	edolla at (	(Area Code & Daytime Telephone Numb	per)	
STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, Flori	orations Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a cl	neck for the following am	ount:		
☐ \$25 Filing Fe	·e	☐ \$55 Filing Fee & Certified Copy		

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: PDS Avhso	in Wine Company, LLC
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	FAVFIRLA, CH 94534
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Napa CH 94589
3/27/06	200408710167
3. Date of filing/registration in Florida 4	Document number
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State
Registered Agent:	CT Corporation 35
Registered Office Address:	Plantenon, F1 33324
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> <u>NEW</u> Registered Agent:	V Registered Office address:  Carl Folkman
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Crystal Beach ,FL 34681
If the limited liability company is not organized under the lathat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the cahereby confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of limited liability company.  (Signature of a member or authorized representative of a member)	address of the registered office and the business se of a Florida limited liability company, it is an affirmative vote of the members of the limited organization or the operating agreement of the
(Printed or typed name of signee) 6m?	Bedolla
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the pro- am familiar with and accept the obligations of my position of F.S. Or, if this document is being filed to merely reflect a c confirm that the limited liability company has been notified	gree to act in this capacity. I further agree to per and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.
(Signature of Registered Agent)	