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PICK-UP WAIT MAIL
(Business Entity Name)
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13 SEP 16 PH 4: 54

SEP 2 A PARTILER



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ellen Rosaio erosaio@cscinfo.com

Date: September 13, 2013

Order#: 773568-030

Re: VINEYARD VINES RETAIL, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ellen Rosaio

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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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: VINEYARD VINE	S RETAIL, LLC		
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	37 Brown House Road Stamford, CT 06902	SECRE	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	6	ARYON ARYON	
	·	- 25	
11/09/2007	M0700006650	n com	
3. Date of filing/registration in Florida	1. Document number	>	
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
Registered Agent:	C T Corporation System		
Registered Office Address:	1200 South Pine Island Road		
•	Plantation, FL 33324		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent:</u> NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Corporation Service Company 1201 Hays Street Tallahassee ,FL 32		
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member lan C. Murray, Authorized Person			
Printed or typed name of signee I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the province and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to men address. I hereby confirm that the limited liability company By: Signstyre (Confirm that the limited liability company)	gree to act in this capacity. I further per and complete performance of m ition as registered agent as provide ely reflect a change in the registered has been notified in writing of this o Sylvia Queppet, Assistant Vice Pres		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00