

109000004362

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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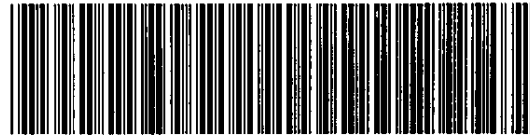
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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T. HAMPTON
NOV - 2 2010
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wine Sergi & Co., LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Diana Maldonado

Name of Person

US Registered Agents, Inc.

Firm/Company

101 Main Street, Suite One

Address

Tappan, NY 10983

City/State and Zip Code

dmaldonado@usregisteredagents.com

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

For further information concerning this matter, please call:

Diana Maldonado

Name of Person

at (954)

340-3375

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



October 29, 2010

Division of Corporations
Florida Department of State
Clifton Building
P. O. Box 6327
Tallahassee, FL 32314

RE: WINE SERGI & CO., LLC

Dear Sir or Madam:

Enclosed please find the Statement of Change of Registered Office or Registered or Both for Limited Liability Company, along with the filing fee of \$ 25.00.

Please have the attached filed and return proof of filing to the undersigned as soon as possible via Regular mail in the enclosed postage paid envelope:

Diana Maldonado
11309 NW 44th Street
Coral Springs, FL 33065

Should you have any questions, or if I can assist you in any way, please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink that reads "Diana Maldonado". The signature is written in a cursive style with a large, looped "D" and "M".

Diana Maldonado
Corporate Specialist
Tele: 954-340-3375

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: Wine Sergi & Co., LLC

2. (a) Principal office address of limited liability company: _____



(Note: MUST BE STREET ADDRESS)

225 SMITH ROAD
ST. CHARLES IL 60174

(b) Mailing address of limited liability company: _____



(Note: MAY BE POST OFFICE BOX)

225 SMITH ROAD
ST. CHARLES IL 60174

11/04/2009

3. Date of filing/registration in Florida

M09000004362

4. 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 US

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: NRAI Services, Inc.

NEW Registered Office Address: 2731 Executive Park Drive, Suite 4

(MUST BE FLORIDA STREET ADDRESS)

Weston, FL 33331

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

Daniel A. Sergi, Manager

Printed or typed name of signer

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 608, 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.

by: Diana Maldonado
Signature of Registered Agent **Diana Maldonado, Asst., Secy.**

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

FILING FEE: \$25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 NOV - 1 PM 2009