M11000000979

((Requestor's Name)	
(Address)		
(Address)		
	(City/State/Zip/Phone #)	
PICK-UF	WAIT MAIL	
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		

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ZBIZ JUL 10 PM 2: 30
SECKETARY OF STATE



J. BRYAN

JUL 1 1 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 27, 2012

JOEL MARCUS, CPA ATTN: HAZEL 676 WEST PROSPECT ROAD FT. LAUDERDALE, FL 33309

SUBJECT: NOBLE TUSCAN WINES, LLC

Ref. Number: M11000000979

ZORZ JUL 10 PM 2: 35

SECRETARY OF STATE
TAIL APPLASSES

We have received your document for NOBLE TUSCAN WINES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

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) 245-6051.

Joey Bryan Regulatory Specialist II

Letter Number: 012A00017585

COVER LETTER

TO: Registration Section Division of Corporations			
Name of Foreign Limited Liability Company			
Dear Sir or Madam:			
The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Please return all correspondence concerning this matter to the following:			
Name of Person grant			
SOEL MARCUS CLA			
Firm/Company			
676 W. ROSPECT PD.			
Address			
F. LAUNFRNALF. FL JUDG			
City/State and Zip Code			
marcuscpa a yahoo con			
E-mail andress: (to be used for fujure annual report notification)			
F. C. d C			
For further information concerning this matter, please call:			
HM2EZ at (954) 566 8513			
Name of Person Area Code and Daytime Telephone Number			
STREET/COURIER ADDRESS: MAILING ADDRESS:			
Registration Section Registration Section			
Division of Corporations Division of Corporations			
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314			
Tallahassee, Florida 32301			
Enclosed is a check for the following amount: \$\text{\$\text{\$\text{25 Filing Fee}}}\$\$ \$\$\text{\$\exititt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitit{\$\text{\$\text{\$\text{\$\text{\$\tiint{\$\text{\$\text{\$\text{			
Certificate of Status Certified Copy Certificate of Status & Certified Copy			

CR2E123(8/07)

AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)

1. The name of the limited liability company Department of State is: NORLE TUSC	as it appears on the records of the Florida AN WINES, WC.	
2. This entity was formed under the laws of:	DELANARE	
3. This entity was authorized to transact business in Fiorida on 02/24/201/ and its Florida document/registration number is M 11000000979.		
4. The name and address of each manager or	r managing member is as follows:	
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGL	TERESA PADULA 676 W. PROSPECT DA	
· · · · · · · · · · · · · · · · · · ·	M- LAUSCRBALE, PL 30001	
- 	TALL	
	AHASSEE F	
	PH 2: 35	
Required Signature: Signature of Manager, M	Managing Member or Member	

Filing Fee: \$25