## M14000005675

(Re	questor's Name)				
. (Ad	dress)	. ********			
(Ad	dress)	<u></u>			
(Cit	:y/State/Zip/Phone	e #)			
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## **COVER LETTER**

CR2E055 (12/14)

TQ: Registration Section Division of Corporations			
SUBJECT: Fedei Properties LL		· <u>.</u>	
Name of Foreign	1 Limited Liabil	ity Comp	pany
Dear Sir or Madam:			
The enclosed application, certificate and fee(s) a	are submitted for	r filing.	
Please return all correspondence concerning this	s matter to the fo	ollowing	:
Bryan J. Stanley, Esq.			
Name of Person			
Bryan J. Stanley, P.A.			
Firm/Company			
209 Turner Street			
Address			
Clearwater, FL 33756			
City/State and Zip Code			
bryan@bryanjstanley.com			
E-mail address: (to be used for future annual	report notification	on)	
For further information concerning this matter,	olease call:		
Maria Fernandez	at ( 727	461-	-1702
Name of Person	Area Code &	& Daytin	ne Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Registr Division P.O. B	ING ADDRESS: ration Section on of Corporations lox 6327 assee, Florida 32314
Enclosed is a check for the following amount:  ■ \$25 Filing Fee  □ \$30 Filing Fee &  Certificate of Status	\$55 Filing Certified C		□ \$60 Filing Fee, Certificate of Status & Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

## **SECTION I (1-4 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: Fedei Properties LLC
2. The Florida document number of this limited liability company is: M14000005675
3. Jurisdiction of its organization: Delaware  4. Date authorized to do business in Florida: August 7, 2014  SECTION II (5-9 complete only the applicable changes)
SECTION II (5-9 complete only the applicable changes)
5. New name of the limited liability company:
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")
6. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:  Enter Florida Street Address
, Florida
New Registered Agent's Signature, if changing Registered Agent:  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 605, 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.
If Changing Registered Agent, Signature of New Registered Agent
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

Title/ Capacity	Name	Address	Type of Action
MGRM	William Tamayo		
			Remove
MRGM	JADDS, LLC	3406 W. Linebaugh Avenue	Add
		Tampa, FL 33618	Remove
MRGM	Diana L. Tamayo	3406 W. Linebaugh Avenue	
		Tampa, FL 33618	Remove
MGR	JADDS, LLC	3406 W. Linebaugh Avenue	<b>≡</b> Add
		Tampa, FL 33618	Remove
MGR	En Vino Veritas, LLC	1061 McKenzie Drive	<b>■</b> Add
		Napa, CA 94559	□ Remove
MGR	En Vino Veritas, LLC	1061 McKenzie Drive	🖬 Add

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Signature of the authorized representative

William Tamayo

Typed or printed name of signee

Filing Fee: \$25.00

TILED

15 JUN 16 AM 11: 21

SECRETARY OF STATE