

P20393

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

RACIA
8/21/09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RAYMOND VINEYARD + CELLAR
Name of Corporation

DOCUMENT NUMBER: P20393

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PAULIE HIGGINS
Name of Contact Person

COMPLIANCE & REPORTING SERVICES
Firm/Company

18147 DEER HILL ROAD
Address

HIDDEN VALLEY LAKE CA 95467
City/State and Zip Code

pauliecrs@aol.com
E-mail address: (to be used for future annual report notification)

RECEIVED
2009 JUL 30 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

PAULIE HIGGINS at (707) 537-8532
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 5, 2009

PAULIE HIGGINS
COMPLIANCE & REPORTING SERVICES
18147 DEER HILL RD.
HIDDEN VALLEY LAKE, CA 95467

SUBJECT: RAYMOND VINEYARD & CELLAR, INCORPORATED
Ref. Number: P20393

We have received your document for RAYMOND VINEYARD & CELLAR, INCORPORATED, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

To change the registered agent or registered office, or both, the enclosed form should be completed and returned to this office with a filing fee of \$35.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 109A00026850

*Please see attached
Jan 8/13/09*

RECEIVED
2009 AUG 17 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of CA/FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: RAYMOND VINEYARD + CELLAR INC
2. The principal office address: 849 ZINFANDEL LANE
ST. HELENA, CA 94574
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 8-8-88 Document number: P20393
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

MEL DICKSON / SOUTHERN WINE + SPIRITS
1600 NW 163 RD
MIAMI, FL 33169

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
109 AUG 20 PM 2:39

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

LAPHAM Sales + Mktg Inc
KEN LAPHAM / SOUTHERN WINE + SPIRITS
1600 NW 163 RD
MIAMI, FL 33169

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Signature of any officer or director

PAULIE HIGGINS COMPLIANCE OFFICER
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Kenneth W Lapham
Signature of Registered Agent

7-21-09
Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. Box 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)