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PICK-UP	WAIT MAIL
/Pusings 5	Entity Name)
(Dusiness s	ining Name)
(Document	Number)
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2019 JUL 15 PM 4:31

B KINSEY

COVER LETTER

TO: Registration Division of	on Section of Corporations		
	ne Bar Hospitality Co		
3016)LC1	Name of corporat	ion - must include suffix	
Dear Sir or Madan	n:		
"Certificate of Exi	plication by Foreign Corporation stence." or "Certificate of Good Soreign corporation to transact bus	Standing" and check are sub	net Business in Florida," omitted to register the
Please return all co Tanya Hira	orrespondence concerning this ma	itter to the following:	
	Name	of Person	
Wine Bar Hospitalit	y Co		
761 86th St	Firm/C	ompany	
	Ac	ldress	
Miami Beach, FL 3.	3141		2019 1.
michelle@winebarh	•	e and Zip code	2019 JUL 15 PH 4: 3
	E-mail address: (to be use	ed for future annual report	notification)
For further informa	ntion concerning this matter, pleas	se call:	PH 4:
Michelle Amoreno	212 at (561-5939	$\frac{\omega}{2}$
Name of I		Ode Daytime Telep	hone Number
Registration Division of Clifton Bu 2661 Exec	f Corporations	MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7
Enclosed is a check	k for the following amount:		
□ \$70.00 Filing F	ee \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Wine Bar Hosp 1.	·			_
(Enter name of one "Inc.," "Co.," "C	corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp."))," "COMPANY," "CORPORATION,"		
(If name unavai	lable in Florida, enter alternate corporate name	e adopted for the purpose of transacting b	usiness in Florida)	
New Jersey		84-1880874	·	
05/24/2019		(FEI number, if applicable)		
4. (Date	e of incorporation)	(Date of duration, if other than perpetual)		
6.				
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	· 	
761 86th St Mian	mi, FL 33141	1502. P.S., to determine penanty hability)		
7	(Princ	ipal office address)		
	(Current mail	ing address, if different)		
0 Name and at	. II SEL II	0 D V07	2019	
8. Name and <u>stre</u>	et address of Florida registered agent: (P. Tanva Hira	O. Box NOT acceptable)	2019 JUL 15	4
Name:			. <u> </u>	
Office Address:	761 86th St		P	FF
	Miami	33141 Florida	PM 4: 31	
	(City)	(Zip code)	$\frac{\partial \mathcal{L}}{\partial t} = \frac{\omega}{2}$	
9. Registered ag	ent's acceptance:			
Having been nan	ned as registered agent and to accept ser	vice of process for the above stated c	orporation at the	place
further agree to c	s application. I hereby accept the appoint comply with the provisions of all statutes	relative to the proper and complete	to act in this capa performance of m	city. T S
duties, and I am j	familiar with and accept the obligations	of my position as registered agent.		
	(. () (m) () //			
	Man III.			
_	(Registered	agent's signature)	-	

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: ____ **B. OFFICERS** Roberto Passon President: 761 86th St Miami Beach, FL 33141 Address: Tanya Hira Vice President: 761 86th St Miami Beach, FL 33141 Address: ယ Secretary: Treasurer: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155. F.S. 13. Roberto Passon OFFICER

(Typed or printed name and capacity of person signing application)

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

WINE BAR HOSPITALITY CO

0450384112

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on May 24, 2019.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

TANYA HIRA 7004 KENNEDY BLVD E APT 11D GUTTENBERG, NJ 07093



IN TESTIMONY WHEREOF. I have hereunto set my hand and affixed my Official Seal at Trenton, this 2nd day of July, 2019

de & A Mum

Elizabeth Maher Muoio State Treasurer

Certificate Number: 6098679582

Verify this certificate online at

https://www.Lstate.nj.us/TYTR_StandingCert/JSP/Verity_Cert.jsp