

LD300 0000222

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

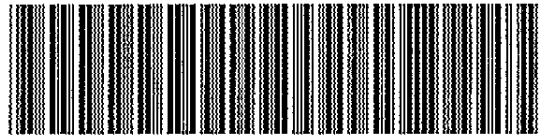
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400009683194

APPROVE
AND
FILE
RECEIVED
JAN -2 PM 4:05
TALLAHASSEE, FLORIDA
DEPT. OF STATE
CORPORATIONS
DIVISION

UB
F303



ACCOUNT NO. : 072100000032

REFERENCE : 877996 9643A

AUTHORIZATION :

Patricia Pijuta

COST LIMIT : \$ 125.00

ORDER DATE : January 2, 2003

ORDER TIME : 2:0 PM

ORDER NO. : 877996-005

CUSTOMER NO: 9643A

CUSTOMER: Steven Wallace, Esq
Sachs, Sax & Klein, P.a.

301 Yamato Road
Suite 4150
Boca Raton, FL 33431

DOMESTIC FILING

NAME: GRAPE ENCOUNTERS WINE CLUB,
LLC

EFFECTIVE DATE:

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP
- ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 1156

EXAMINER'S INITIALS: _____

SECRETARY OF STATE
ATLANTA, GEORGIA

03 JAN -2 PM 1:16

AND
FILED

**ARTICLES OF ORGANIZATION
OF
GRAPE ENCOUNTERS WINE CLUB, LLC**

I, the undersigned, being of legal age and a natural person, do hereby subscribe to, acknowledge and file the following Articles of Organization for the purpose of creating a limited liability company ("Limited Liability Company") under Chapter 608 of the Florida Statutes and the laws of the State of Florida.

ARTICLE I

The name of the Limited Liability Company is: GRAPE ENCOUNTERS WINE CLUB, LLC.

ARTICLE II

The mailing address and street address of the principal office of the Limited Liability Company shall be: 4307 Mariners Cove Drive, Wellington, Florida 33467 but it shall have the power and authority to establish branch offices at such place or places as may be designated by the manager.

ARTICLE III

This Limited Liability Company may engage in any activity or activities permitted under the laws of the State of Florida.

ARTICLE IV

This Limited Liability Company shall commence its existence immediately upon the filing of these Articles of Organization with the Secretary of State of Florida and shall exist perpetually thereafter unless sooner dissolved according to law.

03 JAN -9 PM 1:16
SECRETARY OF STATE
AND
FILED

ARTICLE V

The name and mailing and street address of the initial registered agent of this Limited Liability Company shall be Sheryl Tautiva, 4307 Mariners Cove Drive, Wellington, Florida 33467.

ARTICLE VI

This Limited Liability Company shall be managed by a manager or managers, with the exact number to be specified as set forth in the Operating Agreement of the Company, unless the Operating Agreement is hereafter amended to provide that the Company shall be managed otherwise.

ARTICLE VII

No contract or other transaction between this Limited Liability Company and any other limited liability company or corporation, and no act of this Limited Liability Company, shall in any way be affected or invalidated by the fact that any of the managers of this Limited Liability Company are pecuniarily or otherwise interested in, or are directors or officers or managers of, such other limited liability company or corporation. Any manager individually, or any firm of which any manager may be a member, may be a party to, or may be pecuniarily or otherwise interested in, any contract or transaction of this Limited Liability Company, provided that the fact that he or such firm is so interested shall be disclosed or shall have been known to the managers hereof, and any manager of this Limited Liability Company who is also a director or an officer or a manager of such other limited liability company or corporation, or who is so interested, may be counted in determining the existence of a quorum at any meeting of the managers of this Limited Liability Company which shall authorize any such contract or transaction with like force and effect as if he were not such a director or officer or manager of such other limited liability company or corporation, or not so interested.

ARTICLE VIII

The private property of the members shall not be subject to payment of the debts of the Limited Liability Company to any extent.

ARTICLE IX

This Limited Liability Company may indemnify and insure its manager(s) to the fullest extent permitted by law.

APPROVED AND FILED
JAN 02 2 04 PM '03
CLERK OF COUNTY OF ST. JOHNS

FROM : TIERRADELSOL

FAX NO. : 1+561+333 0044

Jan. 02 2003 11:32AM P3

The power to adopt, alter, amend or repeal the regulations of this Limited Liability Company shall be vested in the manager(s).

IN WITNESS WHEREOF, I, Sheryl Tautiva, the undersigned, being a manager, for the purpose of forming a Limited Liability Company to do business both within and without the State of Florida, under the laws of Florida, make and file these Articles of Organization hereby declaring and certifying that the facts herein stated are true, and hereunto set my hand and seal this 31st day of December, 2002.

By:

Sheryl Tautiva, Manager
Sheryl Tautiva

**CERTIFICATE OF DESIGNATION
OF
REGISTERED
AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

GRAPE ENCOUNTERS WINE CLUB, LLC

2. The name and the Florida street address of the registered agent are:

Sheryl Tautiva
4307 Mariners Cove Drive
Wellington, Florida 33467.

Sheryl Tautiva

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to

APPROVED AND FILED
03 JAN - 2 PM 1:16
ED: BARRY LE STAFF
11/29/02

01/02/2003 12:58 5618930510

SACHS SAX KLEIN

PAGE 05

FROM : TIERRADELSOL

FAX NO. : 1+561+333 0044

Jan. 02 2003 11:32AM P4

the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Sheryl Tautiva

Date: December 31, 2002

APPROVED AND FILED
03 JAN -2 PM 1:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA