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April 12, 2004

BY OVERNIGHT MAIL

Florida Secretary of State Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

RE: The Wine Vault of Boca Raton, LLC
and
The Wine Vaults of Florida, LLC

Dear Sir/Madam:

We wish to form the above two (2) referenced as Florida limited liability companies. Enclosed for filing please find the following:

- 1. Transmittal Letter for The Wine Vault of Boca Raton, LLC;
- 2. Articles of Organization for The Wine Vault of Boca Raton, LLC;
- Transmittal Letter for The Wine Vaults of Florida, LLC;
- 4. Articles of Organization for The Wine Vaults of Florida, LLC; and
- Two (2) checks each in the amount of \$125 payable to Florida Department σβ.
 State for the respective filing fees.

Kindly deliver the Letter of Acknowledgment for each to Patricia Farnsworth, Esq., Lawson & Weitzen LLP, 88 Black Falcon Avenue, Suite 345, Boston, MA 02210

SECRETARY OF STATE
OIVISION OF CORPORATIONS

^{*} ALSO ADMITTED IN NY

^{**} ALSO ADMITTED IN NA

^{**} ALSO ADMITTED IN CA * ALSO ADMITTED IN DC

^{**} ALSO ADMITTED IN NJ & PA

^{***} ALSO ADMITTED IN RI, CT, NH & ME † ALSO ADMITTED IN NH & NY

LAWSON & WEITZEN, LLP

Page 2 April 12, 2004

Please contact me at 617.439.4990 with any questions.

Very truly yours,

atricia Lang Farnsworth

encl.

cc: Charles Iappini (via email)

Valerie L. Pawson (via email)

TRANSMITTAL LETTER

	istration Section ision of Corporations						
SUBJECT:							
(Name of Limited Liability Company)							
The enclosed	Articles of Organization and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:							
	Charles Iappini						
	(Name of Person)						
	(Firm/Company)						
	7 Frances Street						
, 	(Address)						
	Winthrop, MA 02152						
	(City/State and Zip Code)						
For further i	nformation concerning this matter, please call:						
Patrio	:1a Farnsworth at (617) 439-4990						
	(Name of Person) (Area Code & Daytime Telephone Number)						

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 SECRETARY OF STATION DIVISION OF CORPORATION

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The mailing address	dress:	ga af tha muimain.	ol office of the Limited Liebilia. Com-
		ss or the principa	al office of the Limited Liability Comp
Principal Office A	ddress:		Mailing Address:
7 Frances St	reet		7 Frances Street
Winthrop, MA	02152		Winthrop, MA 02152
ARTICLE III - Re The name and the F			ce, & Registered Agent's Signature:
	Torida street addr	ess of the registe	
	Torida street addr		
	Torida street addr	les Iappini Name	ered agent are:
	Torida street addr Char 160 South We	les Iappini Name	red agent are:
	Char 160 South We Florida stree	les Iappini Name st 12th Ave.	y Suite 102

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 the profes 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 608, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE I - Name:

The name and address of each Manager	or Managing Member is as follows:
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Charles Iappini 7 Frances Street Winthrop, MA 02152
(Use attachment if necessary)	
REQUIRED SIGNATURE: Signature of a member of an au (In accordance with section 608.	added if an effective date is requested. (1) (1) (1) (1) (2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1
Charles Iappin	ıi

ARTICLE IV- Manager(s) or Managing Member(s):

Typed or printed name of signee

Filing Fees: \$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)