

L05000008143

2005 JAN 12 P 1:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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



100044055681

01/12/05--01040--010 **155.00

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

FILED

SUBJECT: WINE WATCH CATERING, LLC
(Name of Limited Liability Company)

2005 JAN 12 P 1:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MICHAEL SAPERSTEIN

(Name of Person)

(Firm/Company)

7567 MONARCH COURT

(Address)

DELRAY BEACH, FLORIDA 33446

(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL SAPERSTEIN

(Name of Person)

at (581) 251-7544

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|---|--|---|

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

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2005 JAN 12 P 1:43

ARTICLE I - Name:

The name of the Limited Liability Company is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WINE WATCH CATERING, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

901 PROGRESSO DRIVE
P.O. BOX 4489
FT. LAUDERDALE, FLORIDA 33338-4489

7567 Monarch Court
Delray Beach, FL 33446

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

TONI LAMPASONE

Name

901 PROGRESSO DRIVE

Florida street address (P.O. Box NOT acceptable)

FT. LAUDERDALE 33338

FL

City, State, and Zip

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 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 608, F.S..



Registered Agent's Signature

(CONTINUED)

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

The name and address of each Manager or Managing Member is as follows:

FILED

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

2005 JAN 12 P 1:43

MGRM

MICHAEL SAPERSTEIN

7567 MONARCH COURT

DELRAY BEACH, FLORIDA 33446

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MGRM

TONI LAMPASONE

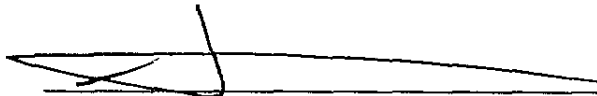
901 PROGRESSO DRIVE

FT. LAUDERDALE, FLORIDA 33338

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

MICHAEL SAPERSTEIN

Typed or printed name of signee

Filing Fees:

**\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent**

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)