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Division of Corporations

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Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)205-0483

From:

Account Name : EXPRESS COMPORATE FILING SERVICE INC.

Account Number : I20000000146
Phone : (305)444-4994
Fax Number : (305)444-4977

LIMITED LIABILITY COMPANY

FINE WINES OF DADE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Marcinopia Plica Maru

Company Flori

Public Accounting

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ARTICLES OF ORGANIZATION FOR FINE WINES OF DADE, LLC

ARTICLE !- Name:

The name of the Limited Liability Company is:

FINE WINES OF DADE, LLC

ARTICLE || - Address:

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

3783 OAKS CLUBHOUSE DR, POMPANO BEACH,FL 33069

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

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

PEDRO VENEGAS

Name

1763 OAKS CLUBHOUSE DR

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

POMPANO BEACH, FL 33068

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 Apent's Signature

PEDRO VENEGAS

Typed or printed riams of signee

05 MPR 25 MINO:

ECFS

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ARTICLE IV - Manager(s) or Managing Member(s):
The name and address of each Manager or Managing or Member is as follows:

Title:

Name and Address:

MANAGER

PEDRO VENEGAS 3763 OAKS CLUEHOUSE DR. POMPANO BEACH, FL 33069

90%

MANAGER

LUZ MARINA MONTILLA

10%

763 OAKS CLUBIOUSE DR.

POMPANO BEACH, FL 33069

(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.)

PEDRO VENEGAS

Typed or printed name of signee