

L10000087311

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

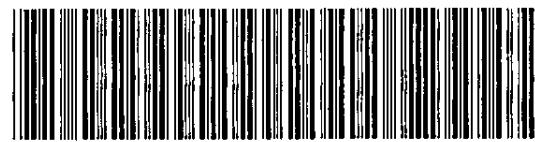
(Business Entity Name)

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10 AUG 19 AM 10:50

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 AUG 19 PM 2:55

B. KOHR  
AUG 19 2010  
EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 483311 7349547

AUTHORIZATION :

COST LIMIT : \$ 125.00

STATE OF TEXAS  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 AUG 19 PM 2:55

ORDER DATE : August 18, 2010

ORDER TIME : 4:43 PM

ORDER NO. : 483311-005

CUSTOMER NO: 7349547

DOMESTIC FILING

NAME: BLUE OCEAN WINE, 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. 2956

EXAMINER'S INITIALS: \_\_\_\_\_

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 AUG 19 PW 25

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

BLUE OCEAN WINE, LLC

(Must end with the words "Limited Liability Company," "LLC," or "LLC.")

### ARTICLE II - Address:

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

Principal Office Address:

1942 East Edgewood Drive  
Lakeland, Florida 33803

Mailing Address:

1942 East Edgewood Drive  
Lakeland, Florida 33803

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Thomas C. Saunders, Esquire

Name

480 South Broadway Avenue

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

Bartow

FL 33830

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.*

BY: Thomas C. Saunders

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Cristian Milani

1942 East Edgewood Drive

Lakeland, Florida 33803

MGR

Francesca Andreoni

1942 East Edgewood Drive

Lakeland, Florida 33803

(Use attachment if necessary)

**ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_.** (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.)

Cristian Milani

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)