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## **COVER LETTER**

Registration Section

ŢO:

Division of Corporations	
SUBJECT: Elite Wine Cellars, LLC	ر د
	ted Liability Company
The enclosed Articles of Organization and fee(s) are	
Please return all correspondence concerning this mat	tter to the following:
Charles Haile	N
	Name of Person
Elite Wine Cellars, LLC	
	Firm/Company
3261 Regal Crest Drive	
	Address
Longwood, Florida 32779	
	ty/State and Zip Code
chaile@cfl.rr.com  E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, pleas	e call:
Charles Haile	at ( 40 <b>1</b> ) 474-5505
Name of Person	at (407 ) 474-5505  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\ \times 130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLE I - Name: The name of the Limited Liability Company is: Elite Wine Cellars, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "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:
3261 Regal Crest Drive	3261 Regal Crest Drive
Longwood, Florida 32779	Longwood, Florida 32779

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:

Charles Ha	alle
	Name
3261 Re	gal Crest Drive
	Florida street address (P.O. Box <u>NOT</u> acceptable)
Longwood	<sub>FL</sub> 32779
	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 (REQUIRED)

(CONTINUED)

Page 1 of 2

"MGR" = Manager "MGRM" = Managing Membe	Name and Address:
MGR	Charles Haile
	3261 Regal Crest Drive
	Longwood, Florida 32779
	<del></del>
(Use attachment if necessary)  LE V: Effective date, if other to	han the date of filing: (OPTIONA
CLE V: Effective date, if other the fective date is listed, the date	han the date of filing: (OPTION/must be specific and cannot be more than five business day
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