## LH 0000 31337

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PICK-UP	MAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	
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Office Use Only



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02/06/14--01020--015 \*\*160.00

Effective Date 2/14/14

SECHE LARY OF STATE OF CORPORATIONS OF CORPORATIONS



## **COVER LETTER**

	stration Section ion of Corporations		
SUBJECT:	Artist Uncorked, LLC Name of Limi	ted Liability Company	
The enclosed	Articles of Organization and fee(s) are	submitted for filing.	
Please return a	all correspondence concerning this man	tter to the following:	
<u></u>	Jennifer Mar	ie & Kimberly Ann Hemande Name of Person	Z
_		Artist Uncorked, LLC. Firm/Company	
	78 Palm	Beach Plantation Blvd. Address	
	Royal Ci	Palm Beach, FL 33411 ty/State and Zip Code	
<del></del>	.lmh12mba@a E-mail address: (to be used	ol.com; kimahernandez@gm for future annual report notifica	ail com ation)
For further int	formation concerning this matter, please	se call:	
Jen	nifer Hernandez at (at (at (	561 ) 797-2524 Area Code Daytime Te	lephone Number
Enclosed is a	check for the following amount:		
□ \$125.00 Filin	g Fee \$\sum \\$\sum \\$\sigma \\$\text{130.00 Filing Fee & Certificate of Status}\$	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	✓ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclose

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



February 11, 2014

JENNIFER MARIE HERNANDEZ 78 PALM BEACH PLANTATION BLVD ROYAL PALM BEACH, FL 33411

SUBJECT: ARTIST UNCORKED, LLC

Ref. Number: W14000008701

We have received your document for ARTIST UNCORKED, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 605.0207, F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on February 6, 2014. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6951.

JENNA D HARRIS Regulatory Specialist II

Letter Number: 314A00003026

SECRETARY OF STATE
DIVISION OF CORPORATIONS

14 FFR - S PM 2: 57

Effective Date 2/14/14

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited L	iability Company is:				
<u> </u>	Artist Untend with the words "Li				1.C." or "I.C.")
(Mus	t end with the words "Li	mited Lia	onity Co	ompany, 1	.L.C., OF LLC. )
ARTICLE II - Address: The mailing address and st	reet address of the princ	ipal office	of the	Limited Lia	ability Company is:
Principal Office Address		Mailing A	Address	<u>:</u>	
Artist Uncorked, LLC. 78 Palm Beach Plantati Royal Palm Beach, FL:	on Blvd		78 Paln	n Beach P	LLC. Plantation Blvd h, FL 33411
ARTICLE III - Registere (The Limited Liability Cor another business entity wi	npany cannot serve as its	s own Reg			s Signature: u must designate an individual or
The name and the Florida	street address of the regi	stered age	ent are:		
	Jennifer Marie	e Hernar Name	idez		
	17769 64th P				<del></del>
F	lorida street address (P.C	D. Box <u>N</u> C	<u>)T</u> acce	ptable)	
<del></del>	Loxhatchee City		FL	33470 Zip	
		_	_		1

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 605, F.S..

Registered Agent's Signature (REQUIRED).

(CONTINUED)

Page 1 of 2

DIVISION OF CORPURATIONS

11. FEB - 6 PM 2: 57

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	,
MGR	Jennifer Marie Hernandez
	17769 64th Place N
	Loxahatchee, FL 33470
MGR	Kimberly Ann Hernandez
	78 Palm Beach Plantation Blvd
	Royal Palm Beach, FL 33411
AMBL	Anthony Hernandez
1111101-	78 Palm Beach Plantation Blvd
	18 raily block to and
	Royal Palm Beach, FL 33411
(Use attachment if necessary)	
(Use attachment if necessary)	
E V: Effective date, if other than the	e date of filing: 6/1/2014 2/14/14 (OPTIONAL)
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E V: Effective date, if other than the ective date is listed, the date must of filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNATURE:	be specific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the ective date is listed, the date must of filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:	f a member or an authorized representative of a member.
JE V: Effective date, if other than the fective date is listed, the date must of filing.)  JE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of (In accordance with sections)	f a member or an authorized representative of a member. ion 605.0203 (1) (b), Florida Statutes, the execution of this document
LE V: Effective date, if other than the fective date is listed, the date must of filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of (In accordance with sectionstitutes an affirmation)	f a member or an authorized representative of a member.

Filing Fees:

Jennifer Marie Hernandez
Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2