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.

(((H16000119495 3)))



H160001194953ADC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:		
	Division of Cor	porations
	Fax Number	: (850)617-6381
From:		
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.
	Account Number	: I20000000019
	Phone	: (305)552-5973
	Fax Number	: (305)675-5944
		ess for this business entity to be used for futur lings. Enter only one email address please.**
E	mail Address:	

FLORIDA LIMITED LIABILITY CO.
MIAMI CHAMPAGNE & WINE BOUTIQUE BAR LLC

RECEIVED

16 HAY 13 PH # 50

SECHANISHER FLORIDA,

Certificate of Status	1	
Certified Copy	0	
Page Count	03	
Estimated Charge	\$130.00	

7Ut 6/7/10

5:21

H16000119495

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

WALCHE I - MAME:
The name of the Limited Liability Company is: (Must end with the words "Limited Liability Company, "LL.C.," or "LL.C.)
MiAMI CHAMPAgne & WINE Boutique BAR LLC
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability
Company is: 3484 w 86th ter
HIALEAL, FC 33018
ATTICEMENT TE 33018
ARTICLE III - Registered Agent, Registered Office:
The name and the Florida street address of the registered agent are: (The Limited Liability Company connot serve as its own Registered Agent. You must designate an individual or another business entity
with an active Florida registration.)
Juan Carlos Alonso
3484 W 864n Ter
Highean FL 33018
THICKEGY! FO SOLO
ARTICLE IV-
The name and title of each person authorized to manage and control the Limited Liability Company:
Trave carlos Alonso (Ambr) "
Tuan carlos Alonso (Ambr) Faderico Zamora. (Ambr)
- GOERICO EAMORA. (HINTO)

H16000119495

Required Signatures:

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

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Tuch Carlos Alonso
Typed or printed name of signee

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)

TALLAHASSET TLORIDA