# 116000095688

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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MAY 20 2016 T SCHROEDER May 13, 2016

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re:

Order #: 9997492 SO

Customer Reference 1: None Given Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Southern Wine & Spirits of North Carolina, Inc. (FL) Conversion Florida

Southern Wine & Spirits of North Carolina, LLC (FL) Formation Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

if for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092.

Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com

# **COVER LETTER**

TO:	Registration S Division of Co				
SUBJ	ECT: Southern	Wine & Spirits of North	Carolina, LLC		
		(Name o	of Resulting Florida	Limited	(Company)
					I fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please	return all corre	espondence concerning	g this matter to:		
Danie	Connelly				
		(Contact Person)			
Hogar	Lovells US LLP				
		(Firm/Company)			
100 ln	ternational Drive	Suite 2000			
		(Address)			
Baltim	ore, MD 21202				
	(C	City, State and Zip Code)			
	.connelly@hogar				
E-n	nail Address: (to be	e used for future annual rep	port notifications)		
For fu	rther informatio	on concerning this mat	tter, please call:		
Daniel	Connelly		_at ( <sup>410</sup>	659-2	762
	(Name of Contac	ct Person)	(Area Code)	(Dayı	time Telephone Number)
Enclos	sed is a check for	or the following amou	nt:		
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles nization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing I and Certified Copy		■\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Regist Divisi Cliftor 2661 I	ration Section on of Corporation Building Executive Center assee, FL 3230	ons er Circle	Registra Division P. O. Bo	ition S n of Co ox 632	orporations

INHS11 (02/14)

# **Articles of Conversion**

For

# "Other Business Entity"

Into

## Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

flie	rolina, Inc. 905 - (0) 7.23	
(Ei	nter Name of Other Business Entity)	
2. The "Other Business Entity" is	a corporation .	
·	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or incorpo	rated under the laws of Florida	
April 26, 2005	(Enter state, or if a non-U.S. entity, the r	iame of the country)
(date of organization, formation or in	acorporation)	
3. The name of the Florida Limite	ed Liability Company as set forth in the attached Artic	les of Organization:
Southern Wine & Spirits of North Car	rolina, LLC	
(Enter Name	e of Florida Limited Liability Company)	
	ling, enter the effective date: June 20, 2016	
date this document is filed by the	e prior to date of receipt or filed date nor more than e Florida Department of State; <u>AND</u> 2) must be the es of Organization, if an effective date is listed there	same as the effectiv
5. The plan of conversion has been	approved in accordance with all applicable statutes.	

Signed this day of	tative of Limited Liability Company:
Signature of Authorized Represen	native of Elimited Elability Company:
Signature of Authorized Representat	tive:
Printed Name: Lee F. Hager	Title: Executive Vice President
	siness Entity: [See below for required signature(s).]
Signature:	
Printed Name: Lee F. Hager	Title: Executive Vice President
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairma	
If Directors or Officers have not been	selected, an Incorporator must sign.
If Florida General Partnership or I Signature of one General Partner.	Limited Liability Partnership:
	imited Liability Limited Partnership:
Signatures of <u>ALL</u> General Partners.	

All others: Signature of an authorized person.

Fees:

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization:

\$125.00

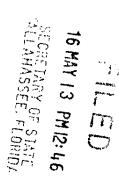
Certified Copy:

\$30.00 (Optional)

Certificate of Status:

\$5.00 (Optional)

Page 2 of 2



## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

....

The name of the Limited Liability Company is:

### Southern Wine & Spirits of North Carolina, 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:
1600 NW 163rd Street	1600 NW 163rd Street
_Miami, Florida 33159	Miami, Florida 33159

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:

Breier, Seif, Silverman	& Schermer, P.A.
N	ame
2800 Ponce De Leon B	lvd., Suite 1125
Florida street address (	P.O. Box NOT acceptable)
Coral Gables	FL 33134
City	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 605, F.S..

Breier, Seif, Silverman & Schermer, P.A.

By:

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IVThe name and address of each person authorized to manage and control the Limited Liability Company:

Name and Address:

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Southern Wine & Spirits Mid Atlantic, Inc.
	1600 NW 163rd Street
	Miami, Florida 33169
(Use attachment if necessary)	
•	
effective date is listed, the date must	ne date of filing: June 20, 2016 . (OPTIONAL) t be specific and cannot be more than five business days
effective date is listed, the date must 90 days after the date of filing.)	
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Page 2 of 2