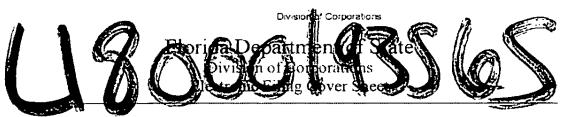
Date: 08/13/18 Time: 10:37 AM Page: 01/04 To: 18506176381 From: 14694451465

8/13/2018



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.

(((H18000235880 3)))



H180002358803ABC2

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

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I2018000011 Phone : (844)386-0178 Fax Number : (214)317-4754

Enter the email address for this business entity to be used for future :: annual report mailings. Enter only one email address please.

Email Address:_

FLORIDA LIMITED LIABILITY CO. WINES AND SPIRITS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

(((H18000235880 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Date: August 6, 2018

ARTICLE I - NAME:

The name of the Limited Liability Company is:

18 AUG 13 AM ED: O

WINES AND SPIRITS, LLC

ARTICLE II - ADDRESS:

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

1619 NW 84 AVE. DORAL, FL 33126

ARTICLE III - REGISTERED AGENT. REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

DIANA MARCH ESPINOSA

Name

653 NW 129 CT

Florida Street Address

DORAL, FL 33182

City, State, and Zip

-continued-

(((H18000235880 3)))

(((H18000235880 3)))

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 605.0203 (1) (b).

Registered Agent's Signature
DIANA MARCH ESPINOSA

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be considered a single member LLC and is therefore a MULTIPLE MEMBERS LLC company with multiple managers. The NAME and ADDRESS of initial MANAGERS/MEMBERS are as follows:

Title Name and Address:
Authorized Member DIANA MARCH ESPINOSA
653 NW 129 CT.

653 NW 129 CT. DORAL, FL 33182

Title Name and Address:
Authorized Member ROSANA GARCIA
1450 SW 30 AVE.
MIAMI, FL 33145

-continued-

(((H18000235880 3)))

To: 18506176381 From: 14694451465 Date: 08/13/18 Time: 10:37 AM Page: 04/04

(((H18000235880 3)))

ARTICLE V BUSINESS DEDUCTIONS

Per IRS regulations the corporation may pay and deduct the health insurance and medical expenses of its directors and employees. Additionally, business auto expenses may be reimbursed to directors and employees and thus deducted from current operations.

ARTICLE VI - EFFECTIVE DATE

The effective date of the Limited Liability Company shall be: AUGUST 15, 2018.

x Or (MG V) ESPINOSC.
Signalure of 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.

ROSANA GARCIA Member/Manager of LLC

August 6, 2018

(((H18000235880 3)))