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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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TRANSMITTAL LETTER

TO:	Registration Section Division of Corporations					
SUBJI	ECT:	GORDON BROTHE	ERS			
	(Nan	ne of Limited Liab	ility Company)			
Florida	closed "Application by Foreign Lia," Certificate of Existence, and chay company to transact business in	eck are submitted				
Please	return all correspondence concern	ing this matter to t	he following:			
		JEFFREY J. GOI	RDON			
		(Name of Pe	rson)			-
		GORDON BROT	HERS	·		
		(Firm/Comp	oany)			-
		671 LEVEY F	ROAD	SEUR	as 40	
		(Address	3)	AS	P 2	German,
		PASCO, WA	99301	SEE, F	7	
		(City/State and 2	Zip Code)	95	0:2	
For fu	rther information concerning this n	natter, please call:		NDA	ິທັ	
	JEFFREY J. GORDON	at (509 547-6331	· ::		
	(Name of Person)	(Ar	ea Code & Daytime Tel	ephone N	umbe	r)
	STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399		MAILING ADDRESS Registration Section Division of Corporation P.O. Box 6327 Tallahassee, Florida 32	ns		

✓ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate

Certificate of Status Certified Copy of Status & Certified Copy

Enclosed is a check for the following amount:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. GORDON BROTHERS, LLC
(Name of Foreign Limited Liability Company)
2. WASHINGTON (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)
4. 06/2002 (Date of Organization) 5. (Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon Approval (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 671 LEVEY ROAD PASCO, WA 99301
(Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here ST ST ST ST ST ST ST ST ST S
9. The name and usual business addresses of the managing members or managers are as follows: JEFFREY J. GORDON - 671 LEVEY ROAD PASCO, WA 99301 DR. 23
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: WINE DISTRIBUTION TO DISTRIBUTORS
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	the Limited Liability Compar	ny is:		•	
GORDON BROT	HERS, LLC		<u> </u>		<u> </u>
2. The name ar	nd the Florida street address of	f the registered ager	nt and office are:	TALL	2
	Jeffrey J. Gordon	n		_ AF	g 71
		(Name)		ASSE	2 1
	1600 N.W. 163rd				
	Florida Street Addre	ess (P.O. Box <u>NOT</u> AC	CEPTABLE)	LORIG	0:25
	Miami	<u>FL</u>	33169	<u> </u>	
		City/State/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 of registered agent as provided for in Chapter 608, Florida Statutes.

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



Secretary of State

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION OF

GORDON BROTHERS ESTATE LLC

I FURTHER CERTIFY that the records on file in this office show that the above named Limited Liability Company was formed under the laws of the State of WA and was issued a Certificate Of Formation in Washington on 1/30/2002.

I FURTHER CERTIFY that as of the date of this certificate, GORDON BROTHERS ESTATE LLC remains active and has complied with the filing requirements of this office.

Date: August 3, 2004

UBI: 602-178-152

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Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State