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| PICK-UP WAIT MAIL                       |
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| (Business Entity Name)                  |
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| (Document Number)                       |
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| Code of Code                            |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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SECRETARY OF STATE DIVISION OF CORPORATIONS

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#### **COVER LETTER**

| 10:     | Division of Corporations  |         |                   |
|---------|---|---------|-------------------|
| SUBJE   | ECT: Near Family Vineyards LLC (Name of Limited Liability Company)  |         |                   |
| Florida | closed "Application by Foreign Limited Liability Company for Authorization to Transact Bu," Certificate of Existence, and check are submitted to register the above referenced foreign by company to transact business in Florida                 |         |                   |
| Please  | return all correspondence concerning this matter to the following:  |         |                   |
|         | Rober Hayes (Name of Person)  |         |                   |
|         | (Name of Person)  |         |                   |
|         | Mear Family Vineyards (Firm/Company)  |         |                   |
| . ţ     | 716 Lipanta Road (Address)  | ال 2006 | SECR<br>DIVISION  |
|         | City/State and Zip Code)  | L 10 PM | FTARY OF          |
| For fur | ther information concerning this matter, please call:   | 1:21    | STATE<br>DRATIONS |
|         | (Name of Person) at (707) 965-2800 (Area Code & Daytime Telephone Number)   |         |                   |
|         | MAILING ADDRESS:  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314  STREET ADDRESS:  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301  |         |                   |
| Enclose | ed is a check for the following amount:  \$\sum_{3125.00}\$ \text{Filing Fee} \sum_{3130.00}\$ \text{Filing Fee & } \sum_{3160.00}\$ \text{Filing Fee, Cert} \text{Certificate of Status} \text{Certified Copy} \text{of Status & Certified Copy} |         |                   |

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: CAli fornia
(Jurisdiction under the law of which foreign limited liability 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in 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: MM People of People of the People of th supplier to wholesale distribution Signature of he 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.) MARK J. NeAL
Typed or printed name of signee

#### State of California Secretary of State

## CERTIFICATE OF GOOD STANDING CALIFORNIA LIMITED LIABILITY COMPANY

I, BRUCE McPHERSON, Secretary of State of the State of California, hereby certify:

That on the **2nd day of March, 2000, NEAL FAMILY VINEYARDS LLC,** became recognized under the laws of the State of California by filing its Articles of Organization in this office; and

That according to the records of this office, the said limited liability company is authorized to exercise all its powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition of this limited liability company.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of June 29, 2006.

BRUCE McPHERSON

BRUCE McPHERSON
Secretary of State

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SECRETARY OF STATE

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### 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 Company is:                                   |   |
|--|---|
| Theat FAMILY Vineyards LL  | _ |
| 2. The name and the Florida street address of the registered agent and office are: |   |
| Terri Froelich Selected Brands   |   |
| 5001 Northwest 13th Ave Suite L. Florida Street Address (P.O. Box NOT ACCEPTABLE)  |   |
| Deerfield Beach FL 33064   |   |
| City/State/Z(p   |   |

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 608, Florida Statutes.

(Signature)

SION OF CORPORATI

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