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JB



# COMPLIANCE CONNECTION

*Winery Compliance and Services*

July 6, 2007

FLORIDA DEPARTMENT OF STATE  
Qualification and Registration Section  
P.O. Box 6327  
Tallahassee, FL 32399

**Re: Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida**

To Whom It May Concern:

Our client intends to file applications with the Department of Business & Professional Regulation/Division of Alcoholic beverages & Tobacco for the purposes of shipping wine to Florida distributors. Enclosed please find the following items necessary to register the Limited Liability Company in the state of Florida on behalf of our client:

**Jacuzzi Family Vineyards, LLC, dba Jacuzzi Family Vineyards**

- ☒ A Check in the amount of \$125.00
- ☒ Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida
- ☒ Certificate of Good Standing from the California Secretary of State

Please contact me at (707) 284-2828, if you have any questions or require anything further at this time.

Sincerely,

Ila Halstead

Compliance Specialist

(707) 284-2828 x301

ila@compliance-connect.com

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Enclosures



707.284.2828  
fax: 707.284.2829

Post Office Box 7838  
Santa Rosa, CA 95407

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

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. Jacuzzi Family Vineyards, LLC  
(Name of foreign limited liability company)
2. California  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 42-1618226  
(FEI number, if applicable)
4. 01/1/2004  
(Date of Organization)
5. Perpetual  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon License Issuance  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 24724 Arnold Dr., Sonoma, CA 95476  
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here
9. The usual business addresses of the managing members or managers are as follows:

<u>Frederic Thomas Cline</u>	<u>24724 Arnold Dr., Sonoma, CA 95476</u>
<u>Nancy Joan Cline</u>	<u>24724 Arnold Dr., Sonoma, CA 95476</u>

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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: \_\_\_\_\_

To sell our wines to wholesalers out side of California

Ila Halstead  
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.)

Ila Halstead

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 Company is:

Jacuzzi Family Vineyards, LLC

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

Roger Gobler

(Name)

8546 SE Wilkes Place

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Hobe Sound

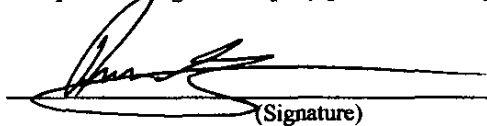
FL

33455

City/State/Zip

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*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, F.S..*

  
(Signature)

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

**State of California**  
**Secretary of State**

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**CERTIFICATE OF GOOD STANDING**  
**CALIFORNIA LIMITED LIABILITY COMPANY**

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That on the **1st day of January, 2004**, **JACUZZI 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 26, 2007.



*Debra Bowen*

**DEBRA BOWEN**  
**Secretary of State**