(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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03/18/08--01025--011 \*\*125.00

G. MCLEOD MAR 2 0 2008 **EXAMINER** 

March 4, 2008

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:

Rainier Wine LLC, dba Rainier Wine

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 A Secretary of State

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

Sincerely,

Jennifer Bowles

Compliance Agent

(707) 284-2828 x314

jennifer@compliance-connect.com

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 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:

1.	. Rainier Wine LLC		_
	(Name of foreign limited liability	y company)	
2	. WA 3. 20-084849	)1	
•	(Jurisdiction under the law of which foreign limited liability company is organized)	( FEI number, if applicable)	
4.	. 3/18/2004 5. Perpetual (Duration) (Duration exist or "	n: Year limited liability company will cease to perpetual")	_
6.	Upon License Issuance (Date first transacted business in Florida. (See sections 608.	501, 608.502, and 817.155, F.S.)	
7.	6537 45th Ave NE, Seattle, WA 98115		_
	(Street address of principal o	ffice)	
8.	. If limited liability company is a manager-managed company, c	heck here ×	SECRE
9.	. The usual business addresses of the managing members or man	nagers are as follows: $\frac{\sim}{\infty}$	OF C
	Damian Davis 6537 45th Ave 1	NE, Seattle, WA 98115	-25-5- -25-5-6- -25-5-6-6-6-6-6-6-6-6-6-6-6-6-6-6-6-6-6-
	Michael Joseph Connelly 6537 45th Ave 1	NE, Scattle, WA 98115	STATE
the	0. Attached is an original certificate of existence, no more than 90 days old, duly be jurisdiction under the law of which it is organized. (A photocopy is not accept anslation of the certificate under oath of the translator must be submitted.)		
11	1. Nature of business or purposes to be conducted or promoted	in Florida:	_
	To sell our wines to wholesalers out side of California		
	Signature of a member or an authorized rep (In accordance with section 608.408(3), F.S., the execution an affirmation under the penalties of perjury that the fact Jennifer Bowles	presentative of a member. on of this document constitutes s stated herein are true.)	
	Typed or printed name of significant to the signifi	gnee	

# 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.

of the Limited Liability Company is:		
LC		
and the Florida street ad	ddress of the registered agent and office are:	
Stefaney Caro		
	(Name)	
2730 Harvard Avenue		
Florida str	reet address (P.O. Box NOT ACCEPTABLE)	
Jacksonville	FL <sup>32210</sup>	
	City/State/Zip	
	Stefaney Caro  2730 Harvard Avenue Florida str	

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.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



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

### CERTIFICATE OF EXISTENCE/AUTHORIZATION **OF** RAINIER WINE 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 3/18/2004.

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

Date: January 29, 2008

UBI: 602-378-144

CHARLE.

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

Sam Reed, Secretary of State