# M11000001649

(Dawnstada Nama)
(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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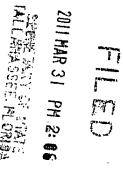
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**EXAMINER** 



400199822854

03/31/11--01024--024 \*\*125.00



#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: BOURGEOIS FAMILY SELECTIONS, LLC Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
PHILIPPE BOURGEOIS  Name of Person
BOURGEOIS FAMILY SELECTIONS, LLC
30 HEMDERSONVILLE RD. STE. 7 E
ASHEVILLE, NC 28803 25 7
PHILIPPE BOUR GEOIS WINES COMES  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
JEM EMERY at (704) 837-2441  Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314  STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\sum_{125.00}\$ \text{Filing Fee} \sum_{130.00}\$ \text{Filing Fee & Certificate of Status} \sum_{155.00}\$ \text{Filing Fee & Certified Copy} \sum_{160.00}\$ \text{Filing Fee, 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:
1 BOURGEOIS FAMILY SELECTIONS, LLC
(Name of Foreign Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. Nonth CondUNA 3. (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
2. NOMH CAND (NH 3. (Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)
4. January 2007 (Date of Organization)  5. PENETUAL (Duration: Year limited liability company will cease to
exist or perpetual )
NO BUSINESS YET DENTE
(Date first transacted business in Florida of prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 30 HENDERSUNVILLE RD STE 7
Descurred ACC 20003
(Street Address of Principal Office)
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:
BOURGEOIS FAMILY SELECTIONS, LCC
BOURGEOIS FAMILY SELECTIONS, LIC PHILIPPE BOURGEDIS, OWNER
30 HENDERSONVICH RD STE7. ASHEVICH, MC 2880
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 eath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: WINE IMPONTATION
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

PHILIPPE BOURGEOIS, PA 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:	
BOURGEOIS FAMILY SELECTIONS, LC	
If unavailable, the alternate to be used in the state of Florida is:	5 840 1-7 1001
2. The name and the Florida street address of the registered agent and office are:  August Baikit  (Name)	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
MIAMI BEACH FL 33140 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 as registered agent as provided for in Chapter 608, Florida Statutes.

Abrahue Kakie (Signature)

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



## NORTH CAROLINA Department of The Secretary of State

## CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

#### **BOURGEOIS FAMILY SELECTIONS, LLC**

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 18th day of January, 2007, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 30th day of March, 2011.

Elaine I. Marshall

Secretary of State



#### North Carolina Department of The Secretary of State

Invoice Number: 10508495

#### **Billing Information**

**Bourgeois Family Selections** 30 Hendersonville Rd. Ste. 7 Asheville, NC 28803

**Contact:** Bourgeois Family Selections

Invoice Number: 10508495

Customer Id Number: 200089394

Invoice Date: 3/30/2011

**Account Type:** Payment upon Delivery

Ship Via: Online

#### **Invoiced Items**

Description	Certificate Number	Customer Reference	Qty	Pages	Item Cost	Sub Total	Amount Due
Existence BOURGEOIS FAMILY S	ELECTIONS, LLC 91405767	•	1	0	\$10.00	\$10.00	Paid
Electronic Transaction Fee	91405768		1	0	\$2.00	\$2.00	Paid
Payment Details							
Credit E-Payment, 3 Acet XXXXXX	XXXXXXXX1039, Auth	186529	1	0	\$12.00	\$12.00	Payment
							\$0.00

\$0.00

#### Make check payable to:

NC Secretary of State

#### **Online Payment:**

http://www.sosnc.com/payinvoice

#### To discuss payment call:

Cash Management (919)807-2017

#### Include Invoice Number on all remitance and send to:

Secretary of State Cash Management PO Box 29622 Raleigh, NC 27626

#### To discuss items ordered call:

Orders Section (919)807-2040

Notice: This invoice is due and payable no later than 30 days from 3/30/2011. Failure to pay the entire invoice within the time described will result in an interest charge of 5% per year until the invoice is paid, as mandated by G.S. 147-86.23. An additional 10% penalty for late payment shall also be due on invoices not paid within 30 days.

There will be a \$25.00 processing fee for all returned checks and ACH returns.