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(Requestor's Name)

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

W12000041250

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12 AUG 14 AM 10:23

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AND  
FILED

D. BRUCE

AUG 15 2012

EXAMINER



**HAND OF GOD**  
*mano de dios*

Jeanie Inglis  
Hand of God Wines  
308 9<sup>th</sup> Ave. N  
Seattle, WA 98109

August 6, 2012

Re: Application by Foreign LLC for Authorization to Transact Business in Florida

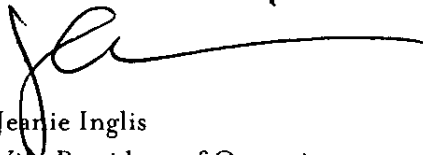
Division of Corporations  
Registration Section  
PO Box 6327  
Tallahassee, FL 32314

Dear Mr. Division of Corporations:

Please find enclosed our Certificate of Designation of Registered Agent/Registered Office. This document was mistakenly not included with our original application to do business in Florida, and I have included a copy of the original application that I sent in last week's mail.

If you have any questions, please let me know.

Sincerely,



Jeanie Inglis  
Vice President of Operations

APPROVED  
AND  
FILED  
12 AUG 14 AM 10:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Enclosures: Certificate of Designation of Registered Agent, copy of Application to transact business in Florida



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 7, 2012

JEANIE INGLIS  
308 9TH AVE. N.  
SEATTLE, WA 98109

SUBJECT: HAND OF GOD, LLC  
Ref. Number: W12000041256

We have received your document for HAND OF GOD, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 712A00020458

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AND  
FILED

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LIFE IS SHORT! 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:

JEANIE INGLIS

Name of Person

LIFE IS SHORT! LLC DBA HAND OF GOD WINES

Firm/Company

308 9TH AVE. N.

Address

SEATTLE, WA 98109

City/State and Zip Code

JEANIE@HANDOFGODWINES.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JEANIE INGLIS

Name of Person

at ( 707 ) 515-0736

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:



\$125.00 Filing Fee



\$130.00 Filing Fee &  
Certificate of Status



\$155.00 Filing Fee &  
Certified Copy



\$160.00 Filing Fee, Certificate  
of Status & Certified Copy

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AND  
FILED

**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. **LIFE IS SHORT! LLC**

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Hand of God, 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. **WASHINGTON STATE**

(Jurisdiction under the law of which foreign limited liability company is organized)

3. **80-0724334**

(FEI number, if applicable)

4. **04-29-2010**

(Date of Organization)

5. **PERPETUAL**

(Duration: Year limited liability company will cease to exist or "perpetual")

6. **09/01/2012**

(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. **308 9TH AVE. N.**

**SEATTLE, WA 98109**

(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:

**JONATHAN STAENBERG**

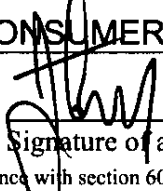
**308 9TH AVE. N.**

**SEATTLE, WA 98109**

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:

**DIRECT TO CONSUMER WINE SHIPMENTS**

  
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.)

**JONATHAN STAENBERG**

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AND  
FILED

**WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE  
STATE OF FLORIDA**

We, the undersigned, do hereby certify that we are the Managers and/or Managing  
Members of LIFE IS SHORT! LLC  
(Name of Limited Liability Company)

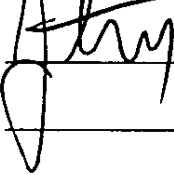
a limited liability company duly organized and existing under the laws of  
WASHINGTON STATE  
(State or Country of Organization)

Because the name of this foreign limited liability company does not satisfy the  
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the  
following name to transact business in the state of Florida:

HAND OF GOD, LLC  
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability  
Company, L.L.C., or LLC.)

Date: JUNE 27, 2012

Signature(s) of Manager(s) and/or Managing Member(s):



SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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:

Life Is Short! LLC

If unavailable, the alternate to be used in the state of Florida is:

Hard of God, LLC

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

Elliott S. Hechtman  
(Name)

7102 Via mediterranea  
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Boca Raton, FL 33433-1041  
City/State/Zip

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

*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.*

Elliott S. Hechtman  
(Signature)

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

UNITED STATES OF AMERICA

# The State of Washington

## 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 LIFE IS SHORT! 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 4/29/2010.

**I FURTHER CERTIFY** that as of the date of this certificate, LIFE IS SHORT! LLC remains active and has complied with the filing requirements of this office.

Date: July 9, 2012

UBI: 603-012-471



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

Sam Reed, Secretary of State