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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : DELANEY CORPORATE SERVICES
Account Number : I20140000112
Phone : (800) 717-2810
Fax Number : (518) 465-7883

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please**

Email Address: Kathleen@delaneycorporate.com

Foreign Limited Liability Company
Lynbrook Beverage Company LLC

Certificate of Status	0
Certified Copy	1
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2018DEC18 AM 11:46

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FILED
STATE OF FLORIDA
TALLAHASSEE



December 18, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

DELANEY CORPORATE SERVICES

SUBJECT: LYNBROOK BEVERAGE COMPANY LLC
REF: W18000108449

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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) 245-6050.

Valerie Herring
Regulatory Specialist III

FAX Aud. #: H18000356408
Letter Number: 818A00025849

2018 DEC 18 AM 11:16

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. LYNBROOK BEVERAGE COMPANY LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "L.L.C.")
- (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "L.L.C.")
2. NEW YORK
(Jurisdiction under the law of which foreign limited liability company is organized)
3. _____
(FBI number, if applicable)
4. Upon filing of the Application
(Date first transacted business in Florida, if prior to registration.
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 789 CRANDON BOULEVARD
(Street Address of Principal Office)
APT. 505
KEY BISCAVNE, FL 33149
6. 789 CRANDON BOULEVARD
(Mailing Address)
APT. 505
KEY BISCAVNE, FL 33149

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: SERGIO A. VINUEZA

Office Address: 789 CRANDON BOULEVARD, APT. 505
KEY BISCAVNE, Florida 33149
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

x Sergio A. Vinueza
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Member</u>	<u>Sergio A. Vinueza</u> <u>789 Crandon Blvd., Apt. 505</u> <u>Key Biscayne, FL 33149</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Use attachments if necessary)

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

x Sergio A. Vinueza
(Signature of authorized person)

SERGIO A. VINUEZA

Typed or printed name of signer

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

**State of New York
Department of State } ss:**

I hereby certify, that LYNBROOK BEVERAGE COMPANY LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/29/2010, and that the Limited Liability Company is existing so far as shown by the records of the Department.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 14th day of December
two thousand and eighteen.*

A handwritten signature in black ink, appearing to read "Whitney Clark".

Whitney Clark
Deputy Secretary of State

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CLERK OF STATE
TALLAHASSEE, FLORIDA