# P10000087038

(Requestor's Name)				
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
· (Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

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10/21/10--01013--010 \*\*113.75

FILED
2010 OCT 21 PM 4: 05
SECRETARY OF STATE

J. SAULSBERRY EXAMINER OCT 25 2010

# **COVER LETTER**

This application is for the purpose of converting WINE IT DOWN LLC to WINE IT DOWN INC.

Article I: WINE IT DOWN INCORPORATED

Article II: 14417 SW 42 ST.

Miami Florida 33175

Article III: Restaurant / Wine Bar

Article IV: 100 Shares

Isabel Samanez 50 Giovanna Sanchez 50

Article V: Isabel Samanez

13886 SW 102 Ln. Miami Fl. 33186

Giovanna Sanchez

15874 SW 66 Ter. Miami Fl. 33193

Article VI: Isabel Samanez 13886 SW 102 Ln. Miami Fl. 33186

Isabel Samanez

Article VII: N/A

FILED
2010 OCT 21 PH 4: 05

## **COVER LETTER**

Division of Corporations
SUBJECT: Wine It Down
Name of Resulting Florida Profit Corporation
The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.
Please return all correspondence concerning this matter to:
Trabel Sanarez Contact Person  Contact Person  Contact Person
Wine It Down Firm/Company
14417 EW 42 St. Address
Miani Fl 33175 City, State and Zip Code
isa sam a horail can chefgiory obelisation
For further information concerning this matter, please call:
Gibliance Southez at (786) 3198737  Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$105.00 Filing Fees and Certificate of Status □ \$113.75 Filing Fees and Certified Copy Certificate of Status □ \$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS:  Pagistration Section  MAILING ADDRESS:  Pagistration Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

### **Certificate of Conversion**

For

### "Other Business Entity"

Into

## Florida Profit Corporation

This Certificate of Conversion <u>and attached Articles of Incorporation</u> are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
Enter Name of Other Business Entity 10500004174
Enter Name of Other Business Entity  2. The "Other Business Entity" is a
first organized, formed or incorporated under the laws of  (Enter state, or if a non-U.S. entity, the name of the country)
on Both Both May Social 4-28-2005  Enter date "Other Business Entity" was first organized, formed or incorporated
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:  When the Down Treorporated  Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date:
6. The conversion is permitted by the applicable law(s) governing the other business entity and the

Page 1 of 2

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting the

conversion.

currently organized, formed or incorporated.

Signed this 16 day of October	, 2010.		
Required Signature for Florida Profit Corporate Individual signing affirms that the facts stated in the a third degree felony as provided for in s.817.155, I	is document are true. Any false inform	mation constit	tutes
Signature of Chairman, Vice Chairman, Birector, Conselected, an Incorporator:  Printed Name:	Officer, or, if Directors or Officers ha	ve not been	
Required Signature(s) on behalf of Other Business stated in this document are true. Any false informat s.817.155, F.S. [See below for required signature(s).]  Signature:  Printed Name:	ion constitutes a third degree felony	as provided fo	
Signature: Sious Sarcher Printed Name: Gious Sarcher		<del>_</del>	
Signature: Printed Name:		<u> </u>	
Signature:Printed Name:	Title:		
		2010 OCT 21 SECRETARY	
Signature:Printed Name:	Title	<u> 출</u> 과 8	7
Timed Name.	Title:	景で	444
Signature:		proprie	
Printed Name:	_ Title:	는 기 R	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:	PH 4: 05 OF STATE OF FLORIDA	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	y Limited Partnership:		
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.			
All others: Signature of an authorized person.			
Fees:			
Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)		

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corp	oration shall be: While It DOWN	n Incorpor	rated	
	RINCIPAL OFFICE	•		
1441-	Principal street address		Mailing address, if different is:	
	A 4474-4 V			
The nurpose for which	Ch the corporation is organized is:			
The purpose for wind	in the corporation is organized is.			
4 D 07 C 7 D 177 C	W4DDG			
ARTICLE IV S The number of shares				
Name and Title	<u>NITIAL OFFICERS AND/OR DIRECTO</u> :SobelSomone	DRS Name and Title:	<b>20</b>	
Address:	mangaer	Address:		
	14417 365 428t		<u> </u>	
	Miani F1 33175		>= -	
Nome and Title	: Guvanna Sarche	Name and Title:	SE 2	
Address:	- Manager	Address:		
7 tuul 033.	14417 SE 47St.	Addiess.		
	Hiami Fl 3305		38 E 7	
	:		₩	
Address:		Address:		
	***************************************	<del>_</del>	<del></del>	
	EGISTERED AGENT			
	la street address (P.O. Box NOT acceptable)	of the registered agent is:		
Name: Address:	Wine It by	$\triangle$		
Address:	Miami FI 33	うに		
		₽3		
ARTICLE VII II				
	ss of the Incorporator is:	20		
Name: Address:	Une State			
Address:	14911 30 973	<del>-</del>		
	ISTURN PT SST	_13		
	as registered agent to accept service of proc			
this certificate, I am f	familiar with and accept the appointment as i	registered agent and agree	to act in this capacity	
IO				
		10-15 -	<u>10</u>	
Required	d Signature/Registered Agent	Date		
I submit this docume	ent and affirm that the facts stated herein a	re true. I am aware that i	any false information submitted in a	
	triment of State constitutes a third degree fel			
$\sim 7$	/			
		10-15 Date	-10	
Required	Signature/Incorporator	Date		