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| Special Instructions to | Filing Officer:        |           |
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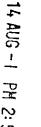
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## **COVER LETTER**

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

| SUBJECT: R           | pad Trip Wines (PROPOSED CORPORA           | Inc.                                    |                            |
|----------------------|--|---|----------------------------|
|                      | (PROPOSED CORPORA                          | TE NAME – <u>MUST INCL</u>              | <u>UDE SUFFIX</u> )        |
| Enclosed are an orig | ginal and one (1) copy of the art          | icles of incorporation and              | d a check for:             |
| \$70.00 Filing Fee   | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy     | & Certificate of<br>Status |
| ADDITIONAL O         |  | ADDITIONAL CO                           | PY REQUIRED                |
| FROM:                | George W. F.<br>Nam<br>2809 W. W           | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                            |
| <del></del>          |  | Address                                 | 746                        |
|                      | Tampa FL City                              | 3361/-478.<br>State & Zip               | 2                          |
|                      | 813 - 500 - 9                              | SEC 6                                   | ···                        |
|                      | hutcheg@ya E-mail address: (to be use      | hov.com                                 |                            |
|                      | E-mail activess: (to be use                | a for future annual report              | nouncation)                |

NOTE: Please provide the original and one copy of the articles.

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

| ARTICLE I N. The name of the corpo | AME ration shall be: Road Trip                                 | Wines In                              | 14 AUG - 1 PM 2:56   |
|------------------------------------|--|---------------------------------------|--|
|                                    | Principal street address                                       |                                       | SECRETARY OF STATE<br>TALLAHASSEE SLORIDA<br>ing address, if different is: SLORIDA   |
| 2809 W. U                          | · · · · · · · · · · · · · · · · · · ·                          |                                       |  |
| Tampa F                            | L 35611-4782   |                                       |  |
|                                    |  |                                       |  |
| ARTICLE III PU                     | n the corporation is organized is: 10 L                        | pholosala w                           | ine and borr   |
|                                    | other legal purpo  |                                       |  |
|                                    |  |                                       |  |
| <u> </u>                           |  |                                       |  |
|                                    |  |                                       | And the state of t |
| *****                              |  |                                       |  |
| ARTICLE V IN                       | 10: George W. Hutchens, 12809 W. Wyoming Au<br>Tampa FL 33611- | RS<br>Prosident<br>Name and Title: Ma | ary L. Hutchens V.P.   |
| Address                            | 2809 W. Wyoming A  | 1. Address: 28                        | og W. Wyoming Avr.   |
|                                    | Tampa FL 33611-  | <u>4</u> 782 <u>Ta</u>                | impa, FL 33 G11-478  |
| Name and Titl                      | e: Maura H. Mc Carthy  | PName and Title:                      |  |
| Address                            | 2809 W. Wyoming Ave  | · Address:                            |  |
|                                    | Maura H. Mc Carthy<br>2809 W. Wyoning Ave<br>Tampa, FL 33611-  | 1782                                  | ,  |
| Name and Titl                      | e:   | Name and Title:                       |  |
| Address                            | ,  |                                       |  |
| <del></del>                        |  |                                       |  |
|                                    |  | <del></del>                           |  |



14 AUG - 1 PM 2:56

| Name and Title:  | Name and Title:            | Q12.05                                  |  |  |  |
|--|----------------------------|---|--|--|--|
| Address  | Address:                   | SECRETARY OF STATE TAIL AHASSEE PLORIDA |  |  |  |
|  |                            |   |  |  |  |
| ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of   | f the registered agent is: |   |  |  |  |
| Name: George W Hutchens  |                            |   |  |  |  |
| Address: 2809 W. Wyoming Aut.  | -                          |   |  |  |  |
| Tampa, FL 33611-4780   | -                          |   |  |  |  |
| ARTICLE VII INCORPORATOR   |                            |   |  |  |  |
| The name and address of the Incorporator is:   |                            |   |  |  |  |
| Name: George W. Hutchens   |                            |   |  |  |  |
| Address: 2809 W. Wyoning A   | e.                         |   |  |  |  |
| Name: George W. Hutchens Address: 2809 W. Wyoning Av. Tampa FL 33611-470   | P2                         |   |  |  |  |
| Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity |                            |   |  |  |  |
| Required Signature/Registered Agent  |                            | 7-30-2014                               |  |  |  |
| Required Signature/Registered Agent  |                            | Date                                    |  |  |  |
| I submit this document and affirm that the facts stated herein are true. I am aware that the 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.               |                            |   |  |  |  |
| Required Signature/Incorporator  |                            | 7-30-2014<br>Date                       |  |  |  |
| Required Signature/Incorporator  |                            | 7-30-2014<br>Date                       |  |  |  |
|  |                            |   |  |  |  |