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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : CORP USA
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
MIAMI FINE WINE AND SPIRITS FESTIVAL INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

84002

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 NOV -6 PM 2:31
14 NOV -6 PM 4:36
RECEIVED

APPROVED
AND
FILED

11/4

414000359701

4

COVER LETTER

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

SUBJECT: Miami Fine Wine and Spirits Festival Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: Lori Ann Rokowitz
Name (Printed or typed)

8370 SW 27 TERR.
Address

MIAMI, FL. 33155
City, State & Zip

305-799-4403
Daytime Telephone number

Lorirakowitz@gmail.com
E-mail address: (to be used for future annual report notification)

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

APPROVED
AND
FILED

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

14 NOV -6 PM 2:31

ARTICLE I NAME
The name of the corporation shall be: Miami Fine Wine and Spirits Festival Inc.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE
Principal street address

Mailing address, if different is:

8370 SW 27 Terr. Miami, FI 33155

same

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Produce event

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lori Rakowitz President

Name and Title: Lori Rakowitz - Secretary

Address: 8370 SW 27 Terr.
Miami, Fl. 33155

Address: 8370 SW 27 Terr.
Miami, Fl. 33155

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

APPROVAL
AND
FILED
(cont.)

14 NOV -6 PM 2:31

Name and Title:	_____	Name and Title:	SECRETARY OF STATE
Address:	_____	Address:	TALLAHASSEE, FLORIDA
_____	_____	_____	_____
_____	_____	_____	_____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Lori Rakowitz

Address: 8370 SW 27 Terr.
Miami, Fl. 33155

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Lori Rakowitz

Address: 8370 SW 27 Terr.
Miami, Fl 33155

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)

Lori Rakowitz
Required Signature/Registered Agent

11/1/14
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.

Lori Rakowitz
Required Signature/Incorporator

11/1/14
Date