P20 000 061 457

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

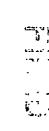
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COVER LETTER

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

SUBJECT:	Winehub Inc.				
	(PROPOSED CORPORAT	TE NAME – <u>MUST INCLU</u>	IDE SUFFIX)		
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	a check for:		
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of Status		
		ADDITIONAL CO	PY REQUIRED		
FROM:	Modesto Name Vyl SW 95th				
	pembroke city.	Pinus, FL State & Zip	<u>3302</u> 5		
	786-349 Daytine To	B - 8 180 elephone number			
E-mail address: (to be used for future annual report notification)					
					

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

1020 JUL 28 PH 2: 04

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

ARTICLE I NAMI The name of the corpora		Vinehub	Inc.			
ARTICLEH PRIN 3407 B MIGHTLA UNITED	CIPAL OFFICE Principal street addres NN 72h d EL 33122 STATES	AVC		Mailing address	if different is:	
ARTICLE III PURP The purpose for which LQQ	OSE the corporation is orga	inized is: OM	INES	ales c) F	
				·		
	stock is:	OR DIRECTORS			l Vice pi Fernand	resident
Name and Tit	pembro	511 / Presi 5th terrace 1Ke pines 3025	Name and Title Address:		avis Fd Gables 3314-3	<u>07 N</u> VNO7
Name and Title Address						

Name and Title:		Name and Title:	
Address		Address:	
ARTICLE VI REGISTER	RED AGENT		
The name and Florida street	address (P.O. Box NOT acceptable) o	of the registered agent is:	
Name: <u>M0.0</u>	USTO 611_	- .	
Address:	SW 95th torra	\underline{c} ℓ	
pun	Abrord pines, f	EL 33025	
ARTICLE VII INCORPO	<u>RATOR</u>		
The name and address of the	: Incorporator is:		
Name:	Modesto Gil	- 00	
Address:	661 SW 95+	ek ale	
	fembroke filles	etrale. Hovida 3.	3025
OPTICLE VIII - PEPECTI	ve n ere		
ARTICLE VIII EFFECTI Effective date, if other than t (If an effective date is listed filing.)		.020 (OPTIONAL) of be more than five days prior	r or 90 days after the
Note: If the date inserted in the document's effective date	this block does not meet the applicable on the Department of State's records.	statutory filing requirements, th	ais date will not be listed as
Having been named as regist certificate, I am familiar with	ered agent to accept service of process f and accept the appointment as registed	for the above stated corporation a	at the place designated in this capacity.
R	equired Signature/Registered Agent		$\frac{7/22/20}{2}$
	affirm that the facts stated hypein are	turn I am arran dan da Cala	Date
document to the Department	of State conditiones a Hird degree felon	y as provided for in s.817.155, F	injormation submitted in a i.s.) 17 つょつふ
			tel-1010
Required Signature/Incorpora		Date	
	,		2020 ``''
			1620 JUL 28
			28 28
			PM 2: 04 FSTATE SEE, FL
			AE AT P