F98000001482

(Reque	estor's Name)	
(Addre	ss)	 .
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(City/S	tate/Zip/Phone	e #)
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DIVISION OF LAW DIVISION OF LA

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COVER LETTER

SUBJECT:	Codorniu Napa Inc.
SUBJECT.	(Name of Corporation)
DOCUMENT NUMBE	R: F98000001482
The enclosed withdraws	al application and fee are submitted for filing.
Please return all correspondanter to the following:	ondence concerning this
	Elise Baril
	(Name of Person)
	Compliance Agent
	(Firm/Company)
	414 Chinn Street
	(Address)
	Santa Rosa, CA 95404
	(City/State and Zip code)
For further information o	concerning this matter, please call:
Charit	y Baril at (707) 578-7807
(Name of	Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:

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

STREET ADDRESS:

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



April 3, 2008

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

RE: Codorniu Napa Inc. dba Artesa Vineyards & Winery

Dear Sir or Madam:

This company does not wish to renew their Authority to Transact Business in Florida. Please cancel their permit effective May 1, 2008. Enclosed are the following:

- 1. Transmittal Letter
- 2. Application by Foreign Corporation for Withdrawal of Authority to Transact Business or Conduct Affairs in Florida
- 3. Copy of Power of Attorney
- 4. \$35 check

If you have any questions, please call me directly at (707) 578-7807.

Sincerely,

Elise Baril

Compliance Agent

EB/cb

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

Codorniu Napa, Inc.	DE ST
(Name of Corporation)	Sold Training
F98000001482	AR CONTROL OF THE PARTY OF THE
(Document Number of Corporation (if known)	4
California	11.57
(Incorporated Under Laws of)	
This corporation is no longer transacting business or conducting affairs within the State voluntarily surrenders its authority to transact business or conduct affairs in Florida. This corporation revokes the authority of its registered agent in Florida to accept ser	vice on its behalf and
appoints the Department of State as its agent for service of process based on a cause of actime it was authorized to transact business or conduct affairs in Florida.	tion arising during the
The following is a current mailing address for the corporation:	
1345 Henry Road	
(Mailing Address)	
Napa, CA 94559	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future of any change in its (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	,
Elise Baril Compliance Agent (Typed or printed name of person signing) (Title of per	t/Power of Attorney son signing)

POWER OF ATTORNEY

I, the undersigned <u>Tim O'Leary</u>, <u>CFO of Codorniu Napa Inc.</u> dba Artesa Vineyards & <u>Winery</u>, do hereby appoint Elise Baril as my attorney-in-fact to execute for me on behalf of the Corporation all applications, notices, monthly reports, and other instruments, claims, letters, writings, papers, and to act for me in dealing with the Alcoholic Beverage Control authorities of every state in connection with matters relating to the laws and regulations administered by each. I further authorize the attorney above named to receive on the Corporation's behalf any and all notices, papers, and letters in connection with such matters, and grant her full power and authority to do all that is essential in and about the premises, as fully as I could do if personally present, with full power of substitution and revocation. I hereby ratify and confirm all that the attorney shall lawfully do or cause to be done by virtue of this appointment.

STATE OF CALIFORNIA

COUNTY OF NAPA

On this 25th day of Wy 2006, before the undersigned Notary Public in and for the State of CALIFORNIA duly commissioned and sworn, personally appeared Tim O'Leary personally known to me to be CFO of Codomiu Napa Inc., dba Artesa Vineyards & Winery known to me (or proved on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and acknowledged to me that he executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal on the date set forth above.

MARY ELIZABETH ALLEN
Commission # 1382419
Notary Public — California
Napa County
My Comm. Expires Oct 29, 2006

MAIN ELIZABETH ALLEN