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August | , 1996

500001913175 -08/06/96--01009--001 ****375.00 ****375.00

Florida Dept. of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Sir or Madam:

(M

Enclosed are the following documents filed on behalf of Vivette & Company:

- 1. Application by Foreign Limited Partnership for Authorization to Transact Business in Florida
- 2. . Check in the amount of \$375

Please authorize this limited partnership's qualification to do business in Florida so that they may sell to wholesalers in your state.

If you have any questions, please call me at (707) 544-7045.

Sincerely,

Elise Baril

Compliance Agent

Encl.

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Florida Department of State, Ilm Smith, Secretary of State

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APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

FOR AUTHORIZATION						
1. Vivette & Company a California Limited (Name of limited partnership as it is in the home s	tate;					
.(If name is unavailable, name under which the lim transact business in Florida; must contain the wor						
California	(Date of Formation)					
3. (State of Formation)	is n					
5. Peter A. Hacker, Exacutive Vice (Name of Registered Agent for S	President 72 5 m					
Premier Beverage Company, 370						
(Street Address of Registered	Office)					
ritt dulat	, Florida 33025 (Zip Code)					
8. 1500 Los Carneros Avenue Napa, CA 9455 (Address of Registered Office required in State of Principal Office.))					
9. NAME OF GENERAL PARTNERS	SPECIFIC ADDRESS					
David W. Graves	1500 Los Carneros Ave, Napa, CA					
Richard A. Ward	1500 Los Carneros Ave, Napa, CA					
11. The limited partnership will undertake to keep contributions of the limited partner or limited partner in Florida is cancelled or withdrawn.						
12. (Mailing Address of	TILINIDO COLOTO O PA					

This	day of, 19	<u>26</u> .
*.	General Partner Richard A. Word	
STATE OF	CA	
COUNTY OF	Napa	
\	OING instrument was acknowledged and sw 1, 19 10, by Richard X. Ward & Company	orn to before me this 10 day (Name of General Partner) of
(Name of Lim Partnership,	nited Partnership), A California on behalf of the Limited Partnership.	(State or Country) Umited
	Notary Public State ofCalifat Large /	OFFICIAL SEAL - 960183 ELISE STEVENS NOTARY PUBLIC - CALIF.
(SEAL)	My Commission Expires: 12/6/96	COUNTY OF BONOMA

FILED 95 AUG -9 AM 8: 04 SECRETAKY UF STATE TALLAHASSEE, FLORDA

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared Richard A. Ward
general partner of Vivette & Company , a (an) California , limited partnership, hereinafter referred to as the "Partnership", wh
certifies as follows:
1. The amount of capital contributions of the limited partners is \$ 1,565,634
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$
This 9 day of July , 19 96.
FURTHER AFFIANT SAYETH NOT.
Under penalties of perjury I declare that I have read the foregoing and that the facts, are true, to the best of rny knowledge and belief.
General Partner
X Coulond III II O
Richard A. Ward 99
STATE OF CA COUNTY OF Napa DATE STATE OF CA COUNTY OF Napa DATE
BEFORE ME, the undersigned officer, a Notary Public authorized to administer caths and to take acknowledgments in and for the State and County set forth above, personally appeared Richard A. Ward (General Partner, known to me and know by me to be the person who executed the foregoing Afficiavit of Capital Contributions, and he ack-
be the person who executed the foregoing Affidavit of Capital Contributions, and he ack- nwledged to me and before me that he executed this Affidavit as General Partner of said partnership.
IN WHITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this
Notary Public
State of California at Large
My Commission Expires: 12/6/96

Section 215.26, Florida Statutes, states in part: "Applications for refunds as provided in this section shall be filled with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred." Three years generally interpreted as meaning three years from the date of payment into the State treasury. The Comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money.

Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or Section ______*, Florida Statutes, I hereby apply for a refund of moneys I paid into the State treasury, which are subject to refund. The following information is submitted to substantiate the claim.

Name: <u>VIV</u>	ETTE 3	<u>Co</u>	OGA_	SANTSA	<u>ivi</u> ei	N or SS#	94-20	11073
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	NAVA	CA		4559			i G L	
Amount:	315.00	Date Pa	aid E	3/1/26			S. 1	2
Reason for cla	im: <u>Overpa</u>	yment of	\$287.50	, needed o	nly \$87	.50 for	foreign	D.
limited [partnership	filing.	(B9600	0000311	Vivett	o & Com	100V # C-	
Cnti	y Mitchell/	Qualifica	itions &	Registrat	ion	<u> </u>	mily a cq	JI TOFNIA
N Certified true → Sig	and correct	gis 19 anda	_ day of	LOVE	mB	X.	, 19	96.
* Must be com	pleted if autho	rity is othe	er than Se	ction 215,26	. Florida	Statutes		
Substantiale the	nends approval o ciaim: A juested above wa 's Receipt No.	f above clain mount of rec s originally a	ommended i deposited in	is the followin refund \$\frac{287}{10 the State Tre	30 as	你把紧紧握。	funds depo	liled on
Name of Accou	nt - Sale and Alle							
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Statutory Autho	ity for Collection	医动脉管 电流流流流						
It is requested th	at payment be ma	de from the f	ollowing acc	ount:				
NAME OF ACC	OUNT:							
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Name: VIVETTE