

May 2, 2002 F0200000 1374

STATE OF FLORIDA Department of State P.O. Box 6327 Tallahassee, FL 32314

Re: Business Registration

To Whom It May Concern:

On behalf of our client, Uve Enterprises, Inc., enclosed please find an Application By Foreign Corporation and a check in the amount of \$70.00. This application is filed in conjunction with a Primary American Source-Brand/Label Registration application to be submitted to the Division Of Alcoholic Beverages & Tobacco on May 6, 2002.

Please contact me at the number reflected below if you have any questions regarding the application provided or if anything further is necessary to complete the registration process. Thank you.

Sincerely,

Linda Fox

Compliance Agent

Enclosures

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02 MAY -6 PM 1: 45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



707.284.2828 fax: 707.284.2829

Post Office Box 7838 Santa Rosa, CA 95407

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which it is incorporated.

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

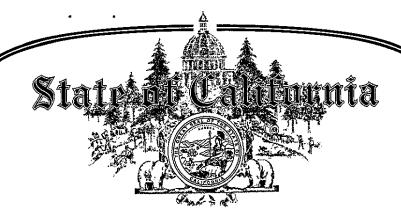
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. UVE ENTER	PRISES, INC.			
(Name of corp	oration; must include the word "IN(CORPORATED",	"COMPANY", "CORPORAT	TON" or
words or abbre natural person	eviations of like import in language of or partnership if not so contained in	as will clearly indi- the name at prese	cate that it is a corporation ins	tead of a
•			,	
2. California		3.	68-0251430	
(State or countr	y under the law of which it is incorp	porated)	(FEI number, if app	plicable)
4. July 1, 1991		5. Perpetual		
(Da	ite of incorporation)	(Duration:	Year corp. will cease to exis	tor "perpetual")
·	begin upon issuance of letter of ack			
(Date firs	st transacted business in Florida.) (S	EE SECTIONS 60	07.1501, 607.1502 and 817.15	5, F.S.)
7. P.O. Box 78:	38			
Santa Rosa,	CA 95407			
	(Current n	nailing address)	······································	
	cet and sell various Italian wines to			
(Purpose	(s) of corporation authorized in hon	ne state or country	to be carried out in state of Fl	orida)
9. Name and st	reet address of Florida register	red agent: (P.O.	Box or Mail Drop Box NO	DT acceptable)
Name:	Chris Lano			•
ranio.	<u> </u>		en e se esta e se esta esta esta esta esta	02 SE TAI
Office Address:	1003 Clint Moore Road			CRE
,	Boca Raton		, Florida, <u>33487</u>	
			(Zip code)	% \
IO Domintouri	49			E P P P P S
io. Registeren	agent's acceptance:			A TIS
Having been nam	ed as registered agent and to accep	t service of proces	s for the above stated corpore	tion at the place designated in
this application, I with the provision	hereby accept the appointment as s s of all statutes relative to the prop	registered agent at er and complete n	nd agree to act in this capacit	y. I further agree to comply
he obligations of	my position as registered agent.	una congrecie pi	injoinance of my dawes, und	s um juminus wan una accept
•	(///		k	
	(Register	ed agent's signatur	re)	
	, 0		•	

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the

Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of

A. DIREC	CTORS (Street address only - P.O. Box NOT acceptable)		
Chairman:	None		
Address: _		-	· .
			
Vice Chair	man: None		<u>=</u>
Address: _			
_			
Director:	Brian Larky		
Address:	1616 Buhman Avenue		
-	Napa, CA 94558		
Director:	Scott McLeod		
Address:	1125 Division Street		<u></u> <u>T</u>
,	Napa, CA 94558	<u></u>	- -
B. OFFI	CERS (Street address only - P.O. Box NOT acceptable)		
President:	Brian Larky		
Address:	1616 Buhman Avenue		
	Napa, CA 94558		
Vice Presi	dent: Scott McLeod	02 SEC	
Address:	1125 Division Street	AH A	
	Napa, CA 94558	ARY SSE	
Secretary:	Brian Larky		
Address:	1616 Buhman Avenue	ORID	-
-	Napa, CA 94558	<i>></i> 6.	<u>.</u>
Treasurer:	Scott McLeod		
Address:	1125 Division Street		
_	Napa, CA 94558		
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or d	irectors.	
13/	(Single of Chairman Win Chairman and Maria I to a 12 and 12 and 12 and 13	notion)	
14 Rrig	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the applican L. Larky, President	cation)	. д
14Bria	(Typed or printed name and capacity of person signing application)		



SECRETARY OF STATE

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BILL JONES, Secretary of State of the State of California, hereby certify:

That on the 1st day of July, 1991, UVE ENTERPRISES, INC. became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 21, 2002.

BILL JONES Secretary of State