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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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SECRETARY OF STATE
TALLAHASSEE, FLOR-D.

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#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: HARPOON DISTRIBUTING COMPANY, INC.  (Name of corporation - must include suffix)			
(Name of corporation - must include surfix)			
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.			
Please return all correspondence concerning this matter to the following:			
WARREN DIBBLE			
(Name of Person)			
HARPOON DISTRIBUTING COMPANY, INC.			
(Firm/Company)			
306 NORTHERN AVE			
(Address)			
BOSTON MA 02210			
(City/State and Zip code)			
For further information concerning this matter, please call:			
WARREN DIBBLE at (6/7, 574-9551 x 543 (Name of Person) (Area Code & Daytime Telephone Number) (Area Code & Daytime Telephone Number)			
(Name of Person)  (Area Code & Daytime Telephone Number)  STREET ADDRESS:  Registration Section  Division of Corporations  409 E. Gaines St.  Tallahassee, FL 32399  (Area Code & Daytime Telephone Number)  Registration Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314  Tallahassee, FL 32314			
Enclosed is a check for the following amount:			
\$70.00 Filing Fee Sectificate of Status Sectified Copy S78.75 Filing Fee Sectificate of Status Certified Copy S87.50 Filing Fee, Certified Copy Certified Copy			

### 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. HARPOON DISTRIBUTING COMPANY, INC. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"	
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
2. MASS ACHUSETTS 3. 80-0023422	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. 01/09/02 5. PERPETUAL"	
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
6(Date first transacted business in Florida, if prior to registration)	-
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7. 306 NORTHERN AVE BOSTON, MA 02210	
(Principal office address)	
SAME AS ABOVE (Current mailing address)	
(Carron Maning activity)	
8. To SHIP OTIR BEER VIA COMMON CARRIER TO SOUTHERN WINE & SE (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) IN MIAMI,	
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
Name: Hereld McKenzie	
Office Address: 1600 NW 16310 STREET	
MI AMI, Florida 33/69	
(City) (Zip code)	
10. Registered agent's acceptance:	
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I	Ŋ
further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties; and I am familiar with and accept the obligations of my position as registered agent.	THE STREET
and I am familiar with and accept the obligations of my position as registered agent.	7
HE Markenzyla FLORIDA 33	J
(Registered agent's signature)	

- 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 which it is incorporated.
- 12. Names and business addresses of officers and/or directors:

## A. DIRECTORS Chairman: \_ Address: Vice Chairman: Address: \_\_ Director: <u>UANIEL</u> KENARY Address: 42 CHATHAM CIRCLE WELLESLEY, MA 02481 Director: RICHARD DOYLE Address: \_\_\_\_ **B. OFFICERS** Vice President: DIBBLE NEWTON STREET, BELMONT, MA 02478 Treasurer: WARREN DIBBLE NEWTON STREET, BELMONT, MA 02478 NOTE: If necessary, you may attach an addendum to the application listing additional officers and officers an (Signature of Director or Officer listed in number 12 of the application) Warren G. Dibble 14.

(Typed or printed name and capacity of person signing application)



Boston, MA 02204

Commonwealth of Massachusetts

Department of Revenue

Taxpayer Service Division
Certificate Unit
P.O. Box 7066

October 5, 2004

HARPOON DISTRIBUTING COMPANY, INC.

306 NORTHERN AVENUE

BOSTON, MA 02210

#### CERTIFICATE OF GOOD STANDING

It is hereby certified by the Commissioner of Revenue of the Commonwealth of Massachusetts as of the above date, that the above named corporation is a domestic corporation organized in Massachusetts on January 9, 2002 and that said corporation is in good standing with respect to any and all returns due and taxes payable to the Commonwealth under General Laws, Chapter 62C, and the statutes referred to in Section 2 thereof.

This certificate does not certify the corporation's standing as to unemployment insurance taxes under G.L.Ch. 151a or taxes under any other provisons or law.

No. 94630

Ву\_\_\_\_

Manager, Automated Systems Bureau 2004 DEC 27 AM 10:

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THIS IS NOT A WAIVER OF LIEN ISSUED UNDER GENERAL LAWS, CHAPTER 62C, SECTION 52, AND CANNOT BE USED FOR SUCH PURPOSE.

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