PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
11 FEB 25 AM 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F05000001563

1. Corporation Name
VALENTINO U.S.A., INC.

REINSTATEMENT 10-11

CR2B081 (6/10)

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
11 West 42nd Street	11 West 42nd Street
Suite, Apt. #, etc.: 26th Floor	Suite, Apt. #, etc.: 26th Floor
City & State: New York, NY	City & State: New York, NY
Zip: 10036 Country: USA	Zip: 10036 Country: USA

4. Date Incorporated or Qualified To Do Business In Florida: March 14, 2005

5. FEI Number: 13-3924430 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: CORPORATION SERVICE COMPANY

Street Address (P.O. Box Number is Not Acceptable): 1201 HAYS STREET

Suite, Apt. #, Etc.:

City: TALLAHASSEE State: FL Zip Code: 323012525

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Sue G. Knight as its agent Date: 2-25-11

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
DP	Luca Vianello	11 West 42nd Street, 26th Floor	New York, NY 10036
D	Stefano Sassi	11 West 42nd Street, 26th Floor	New York, NY 10036
VPF	Carmine Pappagallo	11 West 42nd Street, 26th Floor	New York, NY 10036
S	George M. Pavia	590 Madison Avenue, 8th Floor	New York, NY 10022

10. E-mail Address: gpavia@pavialaw.com
(To be used for future annual report notification)

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: 2/25/2011 212 508-2301

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

3/1 ad

Florida Department of State

Division of Corporations

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Division of Corporations
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CORPORATION REINSTATEMENT
VALENTINO U.S.A., INC.

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