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Florida Department of State  
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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FOREIGN PROFIT/NONPROFIT CORPORATION

Gaston y Daniela, Inc.

Certificate of Status	0
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J. Shivers MAR 04 2009

**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. Gaston y Daniela, 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. Delaware

(State or country under the law of which it is incorporated)

3. 26-2933942

(FEI number, if applicable)

4. 06/24/2008

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 12/01/2008

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. c/o Stairs Dillenbeck Finley, 200 Park Avenue South, Suite 511, New York, NY 10003

(Principal office address)

same

(Current mailing address)

8. The purpose is for the sale of imported fabrics.

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

Florida 33324

(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 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.*

C T Corporation System

By: James M. Newsome

(Registered agent's signature)

**JAMES M. NEWSOME**  
Special Assistant Secretary

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.

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12. Names and business addresses of officers and/or directors:

**A. DIRECTORS SEE ATTACHMENT**

Chairman: Guillermo De Osma

Address: c/o Gaston y Daniela, S.A. Parque Empresarial Las Mercedes, C/ Campezo 1, Edificio 4, Planta 3  
28022 Madrid

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Guillermo De Osma

Address: c/o Gaston y Daniela, S.A. Parque Empresarial Las Mercedes, C/ Campezo 1, Edificio 4, Planta 3  
28022 Madrid

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Stanley T. Stairs

Address: c/o Stairs Dillenbeck Finley, 200 Park Avenue South, Suite 511, New York, NY 10003

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_

(Signature of Director or Officer listed in number 12 of the application)

14. \_\_\_\_\_

STANLEY T. STAIRS SECRETARY

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

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SECRETARY OF STATE  
FALL HASSEE, FLORIDA

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**Attachment to Florida  
Officers & Directors**

- 1 Full Name: Pablo G Abenza  
Officer/Director: Director  
Officer's Title:  
Director's Title: Director  
Business Address: c/o Gaston y Daniela, S.A., Parque  
Empresarial Las Mercedes, C/ Campezo 1,  
Edificio 4, Planta 3  
City: 28022 Madrid  
State:  
ZIP Code:
- 2 Full Name: Santos C Nunez  
Officer/Director: Director  
Officer's Title:  
Director's Title: Director  
Business Address: c/o Gaston y Daniela, S.A., Parque  
Empresarial Las Mercedes, C/ Campezo 1,  
Edificio 4, Planta 3  
City: 28022 Madrid  
State:  
ZIP Code:
- 3 Full Name: Vicente B Mohino  
Officer/Director: Director  
Officer's Title:  
Director's Title: Director  
Business Address: c/o Gaston y Daniela, S.A., Parque  
Empresarial Las Mercedes, C/ Campezo 1,  
Edificio 4, Planta 3  
City: 28022 Madrid  
State:  
ZIP Code:

# Delaware

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*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GASTON Y DANIELA, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF FEBRUARY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 7160750

DATE: 02-27-09