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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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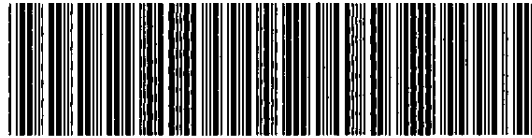
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/23/09--01039--004 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 DEC 23 AM 9:29

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AND
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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: 365 & CO., INC.
Name of corporation - must include suffix

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:

MEGHAN DWYER

Name of Person

FERRANTE, PLLC

Firm/Company

5 WEST 19TH STREET, 10TH FLOOR

Address

NEW YORK, NEW YORK, 10011

City/State and Zip code

AGOLIN@TIN.IT

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MEGHAN DWYER at (212) 308-4440
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & 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. 365 & CO. 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. _____

(FEI number, if applicable)

4. JULY 23, 2009

(Date of incorporation)

5. PERPETUAL

(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. 8370 W. FLAGLER STREET, SUITE 234, MIAMI, FLORIDA 33144

(Principal office address)

8370 W. FLAGLER STREET, SUITE 234, MIAMI, FLORIDA 33144

(Current mailing address)

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8. TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR CORPORATIONS

(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: EDUARDO J. MENDEZ

Office Address: 8370 W. FLAGLER STREET, STE 234

MIAMI

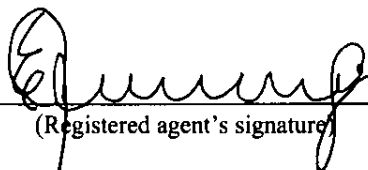
(City)

, Florida 33144

(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.


(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.

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: ANDREA GOLINELLI

Address: VIA SCIESA, 11

MIRANDOLA (MO) ITALY 41037

Director: MARCO RICCI

Address: VIA MILITE IGNOTO, 130

ALESSANDRIA (AL) ITALY 15121

B. OFFICERS

President: ANDREA GOLINELLI

Address: VIA SCIESA, 11

MIRANDOLA (MO) ITALY 41037

Vice President: MARCO RICCI

Address: VIA MILITE IGNOTO, 130

ALESSANDRIA (AL) ITALY 15121

Secretary: MAURIZIO VEZZOLI

Address: PIAZZA DEL ROSARIO 2, MILAN (MI) ITALY 20144

Treasurer: ANDREA GOLINELLI

Address: VIA SCIESA 11, MIRANDOLA (MO) ITALY 41037

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. ANDREA GOLINELLI, PRESIDENT

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

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

Addendum

12. Names and Business Addresses of officers and/or directors: (cont.)

A. DIRECTORS

Director: Andrea Carlo Peruchetti

Address: Corso Plebiscito, 12
Milan (MI) Italy 20129

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TALLAHASSEE, FLORIDA

Delaware

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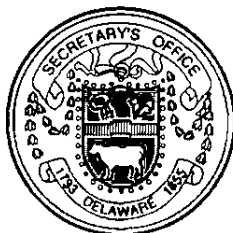
The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "365 & CO. 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 FOURTEENTH DAY OF DECEMBER, A.D. 2009.

APPROVED
AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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You may verify this certificate online
at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7697839

DATE: 12-14-09