

Division of Corporations
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Florida Department of State
Division of Corporations
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TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FOREIGN PROFIT/NONPROFIT CORPORATION

Zinfandel Holdings, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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01-24-8
2010

**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. Zinfandel Holdings, 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. California 3. 68-0369430
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/20/1995 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 621 Capitol Mall, Suite 1900, Sacramento, CA 95814
(Principal office address)
621 Capitol Mall, Suite 1900, Sacramento, CA 95814
(Current mailing address)

8. Any lawful business
(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: CT Corporation

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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 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.

Barbara A Burke

(Registered agent's signature)

Barbara A. Burke
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

Chairman: Julian Lewis

Address: 621 Capitol Mall, Suite 1900
Sacramento, California 95814

Vice Chairman: _____

Address: _____

Director: Eva H. Hill

Address: 621 Capitol Mall, Suite 1900
Sacramento, California 95814

Director: Marianne Soin

Address: 621 Capitol Mall, Suite 1900
Sacramento, California 95814

B. OFFICERS

President: Eva H. Hill

Address: 621 Capitol Mall, Suite 1900
Sacramento, California 95814

Vice President: Michael Isherwood

Address: 621 Capitol Mall, Suite 1900
Sacramento, California 95814

Secretary: Marianne Soin

Address: 621 Capitol Mall, Suite 1900 Sacramento, California 95814

Treasurer: Tara Lucas

Address: 621 Capitol Mall, Suite 1900 Sacramento, California 95814

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

13. Eva H. Hill

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

14. Eva H. Hill

President & CEO

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

State of California
Secretary of State

CERTIFICATE OF STATUS

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TALLAHASSEE, FLORIDA

ENTITY NAME:

ZINFANDEL HOLDINGS, INC.

FILE NUMBER: C1899156
FORMATION DATE: 11/20/1995
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of August 20, 2010.

Debra Bowen

DEBRA BOWEN
Secretary of State