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(Re	equestor's Name)				
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PICK-UP	☐ WAIT	MAIL			
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Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
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COVER LETTER

TO:		Filing Section of Con	tion porations				
SUBJ	FCT.	PER	FUME HO	LDING	CC	RPORATIO	N
зоря	EC1.					nust include suffix	
Dear S	ir or M	adam:					
"Certif	ficate of	f Existenc		e of Good Sta	andir	ng" and check are sub	et Business in Florida," mitted to register the
Please	return :	all corres	pondence concerr	ning this matte	er to	the following:	
Aika	a Da	naye	/a				
				Name o	f Per	son	
KV	3 Pa	rtners	}				
				Firm/Co	mpa	ny	
60 I	3roa	d Stre	et Suite 3	502			
			<u></u>	Add	ress		
Nev	v Yo	rk, N	/ , 10004				
				City/State	and	Zip code	
adm	ninist	ration(@kvbpartne				
			E-mail addres	s: (to be used	for	future annual report n	otification)
For fu	rther in	formation	concerning this	natter, please	call	:	
Aika	a Da	nayev	/a	at (646)	356 0460	
	Name	e of Perso	n			de & Daytime Telepho	one Number
	New I Divisi Clifto 2661	Filing Sec ion of Co on Buildin	rporations g e Center Circle	SS:		MAILING Al New Filing Se Division of Co P.O. Box 6327 Tallahassee, F	ction rporations
Enclos	sed is a	check for	the following am	ount:			
5 \$70	0.00 Fil	ing Fee	S78.75 Filis Certificate			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.

-	·	ne adopted for the purpose of transacting business i	n Florida)	_		
_{2.} NEW YO	RK	_{3.} 90-0543983				
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)		_		
4. 03/08/20	10	_{5.} PERPETUAL				
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "po	erpetual")	_		
6	(SEE SECTIONS 607.1501 & 607	es in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)		-		
_{7.} 60 Broad	Street Suite 3502, New `	York, NY, 10004				
	(Principal office a	nddress)		_		
same as a	bove			BN		
	(Current mailing a	address)	MDC			
Coomotic	00		W 23			
3. Cosmetic	 	r country to be carried out in state of Florida)				
(Purpose(s	or corporation authorized in nome state of	country to be carried out in state of Florida)	PH			
9. Name and stree	<u>et address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	ŧ.	# 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1		
Name:	Paracorp Incorporated	***************************************	25	ATT ATT		
Office Address:	236 East 6th Avenue					
	Tallahassee	, Florida 32303				
	(City)	(Zip code)				
Having been nam designated in this	application, I hereby accept the appoinments of all statute	ervice of process for the above stated corporat intment as registered agent and agree to act in es relative to the proper and complete perforn as of my position as registered agent.	n this cap	acity.		

^{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: _____ Vice Chainnan: Address: Director: Director: _ Address: **B. OFFICERS** President: Consolato Pace Address: 60 Broad Street, New York, NY, 10004 Vice President: Address: _____ Secretary: Giovanni Rubino Address: 60 Broad Street, New York, NY, 10004 Treasurer: Giovanni Rubino Address: 60 Broad Street, New York, NY, 10004 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 14. Giovanni Rubino, Secrotary
(Typed or printed name and capacity of person signing application)

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of PERFUME HOLDING CORPORATION was filed on 03/08/2010, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



**

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 19th day of May two thousand and fourteen.

Outliny Sicidina

Executive Deputy Secretary of State

01/0500055/ 1/5

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 6/10/2014

ENTITY NAME: PERFUME HOLDING CORPORATION

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 236 East 6th Avenue Tallahassee, FL 32303

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in that capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statutes.

Ninh Ho, Assistant Secretary Paracorp Incorporated

Winh for