## F1400003818

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



500263703745

SOFT ICH NOVER FILING

MANAGERIO W. 11. 35

MANAGERIO CONTRACTO

MANAGERIO

14 SEP 10 AM 6:20



ACCOUNT NO. : 12000000195			
REFERENCE : 290206 5023259			
AUTHORIZATION :			
COST LIMIT : \$ 70.00			
ORDER DATE : September 9, 2014  ORDER TIME : 2:49 PM	<b></b>	<b></b>	
ORDER NO. : 290206-005			
CUSTOMER NO: 5023259			
FOREIGN FILINGS			
NAME: MOLESKINE AMERICA, INC.			
XXXX QUALIFICATION (TYPE: CO)	ALC:	4 01 433 M	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		ep ep	۱.,
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING	<b>S</b> A	20	

EXAMINER:

CONTACT PERSON: Courtney Williams -- EXT# 62935

## **COVER LETTER**

TO:	New Filing Section Division of Corp.						
SUBJE	84-1	kine Americ	a. Inc				
SUBJE	CI:			n - must include suffix			
Dear Si	r or Madam:						
				N. Alic N. A. Thomas	ni. rlada n		
"Certifi	icate of Existence,		Good Sta	Authorization to Transa nding" and check are sub ess in Florida.			
Please i	return all correspo	indence concerning	this matte	r to the following:			
Victo	or Cohen						
	<del>-</del>		Name of	Person			
Levi	n & Glasse	er, P.C.					
			Firm/Con	прапу			
420	Lexington	Avenue, Su	ite 28	518			
New	/ York, Nev	w York 1012	Addr 28	ess			
		C	ity/State a	and Zip code			
vcoh	en@levingl						
		E-mail address: (t	be used	for future annual report r	notification)		
For fur	ther information c	oncerning this matte	er, please	call:			
Victo	or Cohen	<b>-4</b> .	212	, 867-3636			
	Name of Person	at 1	Area		one Number		
	STREET/COUR	RIER ADDRESS:		MAILING A	DDRESS:		
New Filing Section				New Filing Section			
Division of Corporations				Division of Corporations P.O. Box 6327			
Clifton Building 2661 Executive Center Circle				Tallahassee, F			
	Tallahassee, FL			•			
Enclose	ed is a check for tl	he following amoun	t;				
<b>5</b> 70	.00 Filing Fee	☐ \$78.75 Filing F Certificate of S		3 \$78.75 Filing Fee & Certified Copy	S87.50 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.

"Inc.," "Co.," "Corp," "Inc," "Co,"	or corp. )			
(If name unavailable in Florida, en	ter alternate comorate nama t	dopted for the purpose of transacting business in Florida)	<b>-</b> .	
New York		20-5326615		
2. (State or country under the law of w	hich it is incorporated)	(PEI number, if applicable)	-	
May 8, 2006		S. Perpetual		
(Date of incorporation)	** ·	(Duration: Year corp. will cease to exist or "perpetual")		
6.				
(Da		Florida, if prior to registration) 02, F.S., to determine penalty liability)	-	
7, 210 Eleventh Avenue, Suite 100	4, New York, New York 10	2001	_	
	(Principal office addr	ess)	-	
210 Eleventh Avenue, Suite 100	04, New York, New York 1	0001	•	
	(Current mailing adds	ess)		
ō,		any mercantile, manufacturing or trading business.	i egy	
(Purpose(s) of corporation as	uthorized in home state or co	untry to be carried out in state of Florida)	·	
9. Name and atreet address of Flor	rida registered agent: (P.C	D. Box NOT acceptable)	Ο,	
Name: Corporation S	Bervice Company	ئى		
Office Address: 1201 Hays St	reet	اری در این این این این این این این این این این این		
Tallahassee		, Florida 32301	0	
<del></del>	(City)	(Zip code)		
designated in this application, I have	l agent and to accept servi vereby accept the appoints provisions of all statutes r	ice of process for the above stated corporation at the nent as registered agent and agree to act in this cap elative to the proper and complete performance of f my position as registered agent.	acity. I	
Corporation Se	prvice Company			
By: Till	(Registered agent's a	1. VP	•	

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: Arrigo Berni Moleskine America, Inc. 210 Eleventh Avenue, Suite 1004, New York, New York 10001 Vice Chairman: \_\_ Address: Director: Address: Director: Address: **B. OFFICERS** Mark Cleslinski President: Moleskine America, Inc. 210 Eleventh Avenue, Suite 1004, New York, New York 10001 Vice President: Address: Victor Cohen Levin & Glasser, P.C. 420 Lexington Avenue, Suite 2818, New York, New York 10170 Monica Calamandrei Moleskine America, Inc. 210 Eleventh Avenue, Suite 1004, New York, New York 10001 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. MONICA CALAMANDREI

(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 MOLESKINE AMERICA, INC. was filed on 05/08/2006, under the name of BLACK AND WRITE, INC., 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.

A Certificate of Amendment BLACK AND WRITE, INC., changing its name to MOLESKINE AMERICA, INC. , was filed 05/13/2008.

The Biennial Statement is past due.



201409090573 \* 45

Witness my hand and the official seal of the Department of State at the City of Albany, this 08th day of September two thousand and fourteen.

Anthony Giardina Executive Deputy Secretary of State

14 SEP 10 AM 8: 20