

F18000003233

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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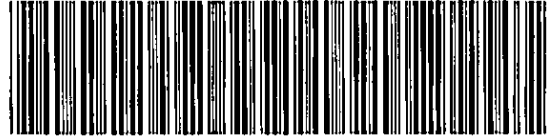
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2018 JUL 11 PM 4:04  
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B FIGUEROA

JUL 17 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 22, 2018

PATRICK CARNEY  
470 COLUMBUS AVE STE 210  
SAN FRANCISCO, CA 94133

SUBJECT: TEQUILAS PREMIUM, INC.  
Ref. Number: W18000058407

We have received your document for TEQUILAS PREMIUM, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Per our telephone conversation, a certificate of status dated within 90 days is required.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Brittany M Figueroa  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 818A00013087

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2018 JUL 11 AM 10:06

DIV. OF CORPORATIONS  
TALLAHASSEE, FL 32314

**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. Teguilas Premium, 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. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. March 2, 2004 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than 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. 470 Columbus Ave, Suite 210, San Francisco, CA 94133  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

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

Name: CT Corporation System

Office Address: 1200 South Pine Island Road  
Plantation, Florida 33324  
(City) (Zip code)

**9. 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.*

**April Wittenwyler  
Assistant Secretary**

  
(Registered agent's signature)

10. 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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2004 JUL 11 PM 4:04  
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JUL 11 2004

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

**A. DIRECTORS**

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

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

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

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

Director: S. Arturo Lomeli

Address: 470 Columbus Ave, Ste 210  
San Francisco, CA 94133

Director: Juan J. Sanchez

Address: 470 Columbus Ave, Ste 210  
San Francisco, CA 94133

**B. OFFICERS**

President: Juan J. Sanchez

Address: 470 Columbus Ave, Ste 210  
San Francisco, CA 94133

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

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

Secretary: Juan J. Sanchez

Address: 470 Columbus Ave, Ste 210, San Francisco, CA 94133

Treasurer: CFO Patrick Carney

Address: 470 Columbus Ave, Ste 210, San Francisco, CA 94133

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

12. \_\_\_\_\_

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

13. Patrick Carney CFO

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

# State of California

## Secretary of State

### CERTIFICATE OF STATUS

ENTITY NAME:

TEQUILAS PREMIUM, INC.

FILE NUMBER: C2439297  
FORMATION DATE: 03/02/2004  
TYPE: DOMESTIC CORPORATION  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, 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 June 27, 2018.

A handwritten signature in black ink, appearing to read "Alex Padilla".

ALEX PADILLA  
Secretary of State