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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Vinumport Duty Free Sales, In	с
Name of corporation	on - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Stabove referenced foreign corporation to transact busing	anding" and check are submitted to register the
Please return all correspondence concerning this matt	er to the following:
Veronica A. Britton	
Name o	of Person
GrayRobinson, PA	
Firm/Co	mpany
401 E Jackson Street, #2700	
	dress
Tampa, FL 33602	
	and Zip code
veronica.britton@gray-robinson.com	27 27 20 20 20 20 20 20 20 20 20 20 20 20 20
E-mail address: (to be used	I for future annual report notification)
For further information concerning this matter, please	e call:
	— <del>-</del>
Veronica A. Britton -GrayRobinson, PA at (813	) <u>273-5072</u> ==
Name of Person Area Co	ode Daytime Telephone Number 5
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:  Please make check payable to: FLORIDA DEPARTMENT  \$70.00 Filing Fee  \$78.75 Filing Fee &  Certificate of Status	ST OF STATE  S78.75 Filing Fee & S87.50 Filing Fee.  Certified Copy 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.

(If name unavail	able in Florida, enter alternate corporate name ac	dopted for the purpose of transacting busi	ness in Florida)
New York - USA 3. 37-1703959  (State or country under the law of which it is incorporated) (FEI number, if applied)		37-1703959	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicab	le)
08/28/2012	5.	(Date of duration, if other than po	
(Date	of incorporation)	(Date of duration, if other than pe	erpetual)
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		
1334 Main S	treet, Champlain, NY 12919		
	(Principal office	e <u>street</u> address)	
71 East Pali	sade Avenue, Suite 1, Englewood,		
	(Current mailing	address, if different)	
	i		بنب
Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	
Name:	Armando Gomez		(* )
ffice Address:	2455 East Sunrise Blvd., Suite 8	01	
		<del></del>	<i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Ft. Lauderdale (City)	, Florida 33304 (Zip code)	154
	(City)	(Zip code)	
aving been namesignated in this enther agree to c	ent's acceptance:  ed as registered agent and to accept service  application, I hereby accept the appointme  omply with the provisions of all statutes rel  with and accept the obligations of my posi	ent as registered agent and agree to a lative to the proper and complete peri	et in this capaci
	( An		

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS				
□Chairman	Name: Shai Perry	□Chairman	Name:	
□Vice Chairman	Address: 401 Douglas Street	□Vice Chairman	Address:	
Director	Englewood, NJ 07631	Director		
		□President		
□Vice President		□Vice President	<del></del>	
□Secretary	□Treasurer	□Secretary		□Treasurer
□Other	□Other	□Other		□Other
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		
□President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	□Secretary		□Treasurer
□Other	Other	□Other	<del></del>	□Other
□Chairman	Name:	□Chairman	Name;	<u>-</u> වෙ
□Vice Chairman	Address:	□Vice Chairman	Address:	<del>-</del> -
□Director		□Director		<u> </u>
□President	<del>-</del>	□President		~ ~
□Vice President		□Vice President		
☐ Secretary	□Treasurer	□Secretary		□Treasurer
□Other	□Other	Other		□Other
	Use an attachment to report more than six (6). The at added to the index when filing signature by Shai C. Perry	<b>G</b> ent of State Annual Ro Y	eport form.	ourposes only. Non-indexed
The officer or dire	tor signing this occurrent (and who is listed in numbers) also information submitted in a document to the Department (and who is listed in numbers).	년 Officer )' per 11 above) affirms th	nat the facts state	d herein are true and that he or
13. <u>Shai Perr</u>	y, President			

## State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of VINUMPORT DUTY FREE SALES INC. was filed on 08/28/2012, 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.

The Biennial Statement is past due.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 05th day of November two thousand and twenty.

Braden C Hydra

Brendan C Hughes
Executive Deputy Secretary of State