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(Requestor's Name) (Address)	800392759488
(Address) (City/State/Zip/Phone #)	c1.12.0101.4101.1 **11.65
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	FIL SECREDARY ALL MAN SSE
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	AUG 25 2022 M. SOLOMON

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: OFF WHITE OPERATING HOLDING, CORP.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

ALESSANDRA PIRAS

	Name of Person			
CINOTTI ŁLP				
	Firm/Company		и	
66 W FLAGLER STREET, Ste 1002		- :	11% P	··][``}
	Address		AUG	، ا مەرەپىيە
MIAMI, FL 33130			22	-
City/State and Zip code			AM II	(T)
legalmiami@cinottigalgano.com		Un Un		
E-mail addr	ess: (to be used for future annual report notification)	jeni jeni		
For further information concerning this	s matter, please call:			
Mariagrazia Labianca	at () 5772291			
Name of Person	Area Code Daytime Telephone Number	_		

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 OF STATE \$70.00 Filing Fee \$78.75 Filing Fee & \$\$78.75 Filing Fee \$\$

\$87.50 Filing Fee,

· ' , · ·

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.

OFF WHITE OPERATING HOLDING, CORP. 1.

(Enter name of corporation: must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp,")

(If name unavail	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in Flo	orida)		
DELAWARE		3.	81-2577840 (FEI number, if applicable)			
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)			
05/06/2016		5.				
(Date of incorporation)			(Date of duration, if other than perpetual)			
	(Date first transacted busine		n Florida, if prior to registration) 502, F.S., to determine penalty liability)			
c/o FUNARO &	CO. P.C., 350 Fifth Avenue, 41st Floor, NE	EW	YORY, NY 10118			
	(Principal	offi	ice <u>street</u> address)			
	(Current ma	ailir	ng address, if different)	יביד ג'+ג רייער ייד≺ג'		
Name and stree	et address of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	155		
Name:	CINOTTI LLP			ישט ^{וש} ויירי ריט די		
office Address:	66 W FLAGLER STREET, Ste 1002	.	<u> </u>			
	MIAMI		. Florida <u>33130</u>	•.		
	(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.

(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.

|--|

□Chairman	ANDREA GRILLI	□ Chairman	FILIPPO CINOTTI Name:	
□Vice Chairman	c/o FUNARO & CO. P.C.	□Vice Chairman	Address:	
Director	350 Fifth Avenue, 41st Floor	Director	c/o CINOTTI INTERNATIONAL LLC	
President	NEW YORK, NY, 10118	□President	239 Avenida Arterial Hostos. Suite 406	
□Vice President		□Vice President	San Juan, PR 00918	
□ Secretary	Treasurer	Secretary		
□Other	Other	Other	Other	
□Chairman	VIRGIL ABLOH	□Chairman	PAOLO ZANOTTI Name:	
□Vice Chairman	Address:	□Vice Chairman	c/o FUNARO & Co. P.C.	
Director	350 Fifth Avenue, 41st Floor	Director	350 Fifth Ave. 41st Floor	
DPresident	NEW YORK, NY 10118	□President	NEW YORK, NY 10118	
□Vice President		□Vice President		
Secretary	Treasurer	Secretary	Treasurer	
□Other	Other	Other	□Other	
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address: 70 C	
Director		Director		
President		□President		
□Vice President		□Vice President	<u></u>	
Secretary	Treasurer	Secretary	□ Treasurer	
□Other	Other	Other	Other	

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when oling your Florida Department of State Annual Report form.

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 \$.817.155, F.S.

13. FILIPPO CINOTTI, Secretary





Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OFF WHITE OPERATING HOLDING, CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF AUGUST, A.D. 2022.





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