# F23000000771

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

Office Use Only



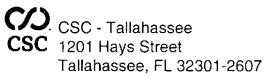
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S. ROBERTS

JAN - 9 2023



850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations

From: Alexxis Weiland

Ext: 61592 Date: 02/08/23 Order #: 434856-1

Re: Carolina Herrera, Ltd. Processing Method: Routine

## TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$70.00 - FL State Account Number:

publenan

12000000195

**AUTHORIZATION:** 

Please take the following action: File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## **COVER LETTER**

	tration Section ion of Corporations				
SUBJECT:	Carolina Herrera LTD.				
30202011	N	ame of corporat	ion - mu	st include suffix	
Dear Sir or M	adam:				
"Certificate o	"Application by Foreig Existence," or "Certif ced foreign corporation	icate of Good S	tanding'	and check are subr	t Business in Florida," nitted to register the
Please return	all correspondence con	cerning this mat	ter to th	e following:	
Elana Schwart	Z				
	···	Name	of Perso	n	
Carolina Herre	ra LTD.				
		Firm/C	ompany		<del> </del>
501 Seventh A	venue				
		Ad	dress		
New York Ne	w York 10018				
		City/Stat	e and Zi	p code	
elana.schwartz	@cherrera.com				
	E-mail ad	dress: (to be use	d for fu	ture annual report n	otification)
For further in	formation concerning the	his matter, pleas	e call:		
Elana Schwart	2	at (	, 6	13-8330	
Name	e of Person	Агеа С		Daytime Teleph	none Number
Regis Divis The C 2415	EET/COURIER ADD tration Section ion of Corporations tentre of Tallahassee N. Monroe Street, Suite nassee, FL 32303			MAILING AN Registration So Division of Co P.O. Box 6327 Tallahassee, Fi	ection orporations
	_		□ \$78	STATE .75 Filing Fee & tified 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.

	a,LTD. , INC				
	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	D," "COMPAN	Y," "CORPORATION,"		
(If name unavail	able in Florida, enter alternate corporate nam	•		Florida)	
Delaware		3. 13-3792192	13-3792192 (FEI number, if applicable)		
(State or countr	y under the law of which it is incorporated)		(FEI number, if applicable)	٠	
08/17/1994		5			
(Date	(Date of incorporation)		te of duration, if other than perpetual	)	
	(Date nest transacted busines	s in Florida, if p	rior to registration)		
501 Seventh Ave	(Date first transacted busines (SEE SECTIONS 607.1501 & 607 nue NY NY 10018 (Principal o		etermine penalty liability)	1	
501 Seventh Ave	(SEE SECTIONS 607.1501 & 607	.1502, F.S., to d	etermine penalty liability) . rcss)	- 	
-	(SEE SECTIONS 607.1501 & 607	ffice street add	etermine penalty liability) rcss) different)	- 	
. Name and stree	(SEE SECTIONS 607.1501 & 607 nue NY NY 10018  (Principal of Current mainstrance and registered agent: (I	ffice street add	etermine penalty liability) rcss) different)	- 	
. Name and stree Name:	(SEE SECTIONS 607.1501 & 607 nue NY NY 10018  (Principal of Current mainst address of Florida registered agent: (If Corporation Service Company)  1201 Hays Street	ffice street add	etermine penalty liability)  ress)  different)  acceptable)	2022 F.F. 3 - 3   1 - 15   1	

#### 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.

By: Corporation Service Company

(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.

### A. DIRECTORS Joan Albiol Marc Puig Chairman Chairman Name: □Chairman Plaza Europa 46/48 Plaza Europa 46/48 □Vice Chairman Address: □ Vice Chairman Address: 08902, L'Hospitalet de Llobregat 08902, L'Hospitalet de Llobregat □ Director Director Barcelona, Spain Barcelona, Spain □ President □ President □Vice President ☐ Vice President ☐ Secretary Treasurer □ Secretary ☐ Treasurer □Other \_\_\_\_\_ Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ Emilie Rubinfeld □ Chairman Name: Chairman Name: \_\_\_\_\_ 501 Seveth Avenue □Vice Chairman Address: □ Vice Chairman Address: New York, NY 10118 Director Director President □President ☐ Vice President ☐ Vice President □ Secretary ☐ Treasurer Secretary ☐ Treasurer □ Other \_\_\_\_\_ □Other \_\_\_\_\_ ☐ Other ...\_\_\_\_\_ Other \_\_\_\_ ☐ Chairman □Chairman □Vice Chairman Address: \_\_\_\_\_ ☐ Vice Chairman Address: □ Director Director □President □ President ☐ Vice President \_\_\_ ☐ Vice President ☐ Secretary ☐ Treasurer □ Secretary ☐Treasurer □ 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 filing your Florida Department of State Annual Report form. 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<sub>2</sub>S. (Typed or printed name and capacity of person signing application)

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## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CAROLINA HERRERA, LTD." 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 SIXTH DAY OF FEBRUARY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CAROLINA"

HERRERA, LTD." WAS INCORPORATED ON THE SEVENTEENTH DAY OF AUGUST,

A.D. 1994.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 202648281

Date: 02-06-23

2428075 8300 SR# 20230384936