

Document Number Only  
**F 95000004329**

C T CORPORATION SYSTEM  
Requestor's Name  
660 East Jefferson Street  
Address  
Tallahassee, Florida 32301  
City State Zip Phone  
904-222-1092  
CORPORATION(S) NAME

500001579545  
-09/07/95--01045--011  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

*The Viking Distillery Inc.*

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Profit         | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> NonProfit                 | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other              |
| <input checked="" type="checkbox"/> Foreign        | <input type="checkbox"/> Reservation            | <input type="checkbox"/> Change of R.A.     |
| <input type="checkbox"/> Limited Partnership       | <input type="checkbox"/> Photo Copies           | <input type="checkbox"/> Fictitious Name    |
| <input type="checkbox"/> Reinstatement             | <input type="checkbox"/> Call When Ready        | <input type="checkbox"/> CUS/ G/S           |
| <input type="checkbox"/> Certified Copy            | <input type="checkbox"/> Call if Problem        | <input type="checkbox"/> After 4:30         |
| <input type="checkbox"/> Call When Ready           | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up |
| <input checked="" type="checkbox"/> Walk In        |   |   |
| <input type="checkbox"/> Mail Out                  |   |   |

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION  
TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS  
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE  
STATE OF FLORIDA:

1. The Viking Distillery, Inc.  
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Georgia  
(State or country under the law of which it is incorporated)
3. 58-2173528  
(FEI number, if applicable)
4. 06/28/95  
(Date of incorporation)
5. Perpetual  
(Duration: Year corp. will cease to exist or "perpetual")
6. Upon Rev.  
(Date first transacted business in Florida. (See sections 607.1501, 607.1502 and 817.156, F.S.))
7. 1101 East Broad Street  
Albany, Georgia 31705  
(Current mailing address)  
Sale from without the State of Florida of beverage alcohol products to wholesalers within the State of Florida.
8. Sale from without the State of Florida of beverage alcohol products to wholesalers within the State of Florida.  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent:

Name: C T CORPORATION SYSTEM

Office Address: c/o C T Corporation System, 1200 South Pine Island Road

Plantation, Florida, 33324  
(Zip Code)

10. Registered agent 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.

C T CORPORATION SYSTEM

Beth Pope  
(Registered agent's signature) (Officer)

Beth Pope Asst. Secy  
(Type Name and Title of Officer)

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95 SEP - 7 PM 1:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 addresses of officers and/or directors:

A. DIRECTORS

Director ~~Chairman~~: Ellis M. Goodman

Address: 69 Park Avenue

Glencoe, IL 60022

Director ~~Vice Chairman~~: Fred R. Mardell

Address: 990 N. Lake Shore Drive

Chicago, IL 60611

Director: Alexander L. Berk

Address: 491 Washington Street

Glencoe, IL 60022

Director: Edward L. Golden

Address: 750 Great Elm Lane

Highland Park, IL 60035

B. OFFICERS

President: Ellis M. Goodman

Address: 69 Park Avenue

Glencoe, IL 60022

Vice President: James W. Harcrow

Address: 102 Churchill Circle

Leesburg, GA 31763

Vice President & Secretary: Fred R. Mardell

Address: 990 N. Lake Shore Drive

Chicago, IL 60611

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

Treasurer: Norman R. Goldstein

Address: 7736 West Arcadia

Morton Grove, IL 60053

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

13. 

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Fred R. Nardell, Vice President and Secretary

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

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95 SEP -7 PM 1:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Secretary of State**  
**Business Information and Services**  
**Suite 315, West Tower**  
**2 Martin Luther King Jr. Dr.**  
**Atlanta, Georgia 30334-1530**

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FORM NUMBER 1 0211

CT CORPORATION SYSTEM  
PATTIE HARDY  
1201 PEACHTREE STREET, NE  
ATLANTA, GA 30361

**CERTIFICATE OF EXISTENCE**

I, **MAX CLELAND**, Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

**THE VIKING DISTILLERY, INC.**  
**A DOMESTIC PROFIT CORPORATION**

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



**FILED**  
**35 SEP - 7 PM '95**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**  
**MAX CLELAND**  
**SECRETARY OF STATE**