

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 DEC 18 PM 2:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. DOCUMENT # M0100002299

Name and Mailing Address

0008842 01 FP 0,352 **PRSRT HB 0 0615 10022-250899
KENZO PARFUMS NA LLC
19 EAST 57 STREET
NEW YORK NY 10022-2508



2. New Mailing Address LVMH PARFUMS AND COSMETICS SERVICES City, State, Zip 85 MAYFIELD AVE EDISON NJ, 08637		4. State/Country of Formation DE																									
3. New Principal Place of Business Address Principal Place of Business 19 EAST 57 STREET NEW YORK NY 10022 City, State, Zip		5. Date Organized or Qualified To Do Business in Florida 10/11/2001																									
8. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525		6. FEI Number 13-4172767 Applied For Not Applicable																									
9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		7. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status																									
10. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S. Signature of Registered Agent: <i>[Signature]</i> Brian Courtney Asst. V. Pres. Date: 12-18-02 REGISTERED AGENT MUST SIGN																											
11. Names and Street Addresses of Each Managing Member/Manager <table border="1"> <thead> <tr> <th>Title(s)</th> <th>Name of Managing Members/Managers</th> <th>Street Address of Each Managing Member/Manager</th> <th>City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>MGR</td> <td>LVMH MOET HENNESSY LOUIS VUITTON INC.</td> <td>19 EAST 57 STREET</td> <td>NEW YORK NY 10022</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>				Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip	MGR	LVMH MOET HENNESSY LOUIS VUITTON INC.	19 EAST 57 STREET	NEW YORK NY 10022																
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REINSTATEMENT

12. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager: *[Signature]* Date: 1/14/02 Daytime Phone #: 1 212 931 2692

CR2E084 (8/02)

