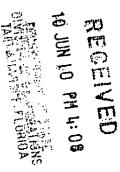
M 1000002672

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

Office Use Only



900181799959



18 :8 NY 01 NOF 01

B. KOHR
JUN 1 7 2010

EXAMINER



ON ŞERVICE COMPANY.	
ACCOUNT NO. : 12000000195	
REFERENCE : 412623 7607544	્ય
AUTHORIZATION : Spelle le man	10 Alsta
COST LIMIT : \$ 125.00	10 JUH 1
ORDER DATE : June 10, 2010	is is
ORDER TIME : 3:55 PM	بين
ORDER NO. : 412623-005	•
CUSTOMER NO: 7607544	
FOREIGN FILINGS	
NAME: ABSOLUT SPIRITS USA, LLC	
XXXX QUALIFICATION (TYPE: LL)	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XXX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Matthew Young EXT# 2962	

EXAMINER:



O JUN 10 M 8:51

June 11, 2010

MATTHEW YOUNG CSC TALLAHASSEE, FL

SUBJECT: ABSOLUT SPIRITS USA, LLC

Ref. Number: W10000028075

RESUBMIT

Please give original submission date as file date.

We have received your document for ABSOLUT SPIRITS USA, LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

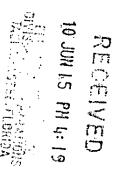
In Item 9, the name of the company that is qualifying has been entered. Please enter the NAMES of the company's MANAGERS or MANAGING MEMBERS.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 410A00014525



APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: ABSOLUT SPIRTS USA, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") **DELAWARE** (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) JUNE 1, 2010 (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 401 PARK AVENUE SOUTH, 6TH & 7TH FLOORS, NEW YORK, NY 10016 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Stephane Longuet: Arstaangsvagen 19a, SE-117 97 Stockholm, Sweden Annelie Mahlm: Arstaangsvagen 19a, SE-117 97 Stockholm, Sweden Jonas Renner Tahlin: Arstaangsvagen 19a, SE-117 97 Stockholm, Sweden 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY

Sharon Mayers authorized representative

Typed or printed name of signee

Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penaltics of perjury that the facts stated herein are true.)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:
ABSOLUT SPIRITS USA, LLC
If unavailable, the alternate to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
CORPORATION SERVICE COMPANY (Name)
1201 HAYS STREET Florida Street Address (P.O. Box NOT ACCEPTABLE)
TALLAHASSEE/ FL 32301 City/State/Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Matthew Youn

Asst. V. Pres.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE

The First State

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

DELAWARE, DO HEREBY CERTIFY "ABSOLUT SPIRITS USA, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE NINTH DAY OF JUNE, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ABSOLUT SPIRITS USA, LLC" WAS FORMED ON THE FIRST DAY OF JUNE, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4831004 8300

100640671

DATE: 06-09-10

AUTHENTACATION: 8042620

Jeffrey W Bullock, Secretary of State

You may verify this certificate online at corp.delaware.gov/authver.shtml