## M15000008a41

(Re	equestor's Name)				
(Address)					
(Ac	ldress)				
(Ci	ty/State/Zip/Phon	e #)			
PICK-UP	WAIT	MAIL			
(Bu	isiness Entity Nar	me)			
(Do	ocument Number)				
Certified Copies	_ Certificates	s of Status			
Special Instructions to	Filing Officer:				
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Office Use Only



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2015 OCT 14 AM 9: 25
SLORETARY OF STATE
ALLAHASSEE TLOKUD.

2015 OCT 14 PH 2: 0

OCT 15 2015 J. HARRIE CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 830920 760754

AUTHORIZATION : Spelle Con

COST LIMIT : \$\di25\di25\di200

ORDER DATE: October 14, 2015

ORDER TIME : 10:36 AM

ORDER NO. : 830920-005

CUSTOMER NO: 7607544

#### FOREIGN FILINGS

NAME: CALLE TRES LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

#### COVER LETTER

TO:	Registration Sec Division of Corp			·			
SUBJE	CALLE TRE	3S LLC					
		Name	of Limited Liability Compa	uny			
				o Transact Business in Florida," Certificate of bility company to transact business in Florida.			
Please	return all correspond	dence concerning this matter to	he following:				
	SHARO	N MAYERS					
		Name of Person					
	PERNO	D RICARD USA					
		Firm/Company					
	250 PAR	250 PARK AVENUE, 17TH FLOOR					
	Address						
	NEW YO	ORK, NY 10177					
	*	City	/State and Zip Code				
	sharon.nia	yers@pernod-ricard.com					
		E-mail address: (to be u	sed for future annual report	notification)			
For furt	her information con	cerning this matter, please call:					
	Sharon Mayers		519 561 at ( )	-5225			
	7	Name of Contact Person		Daytime Telephone Number			
	MAILING ADDI Division of Corpor Registration Section P.O. Box 6327 Tallahassee, FL 32	rations on	Divis Regis Clifto 2661	EET ADDRESS: ion of Corporations stration Section on Building Executive Center Circle hassee, FL 32301			
Enclose	d is a check for the ☐ \$125.00 Filing I	•	☐ \$155.00 Filing Fee Certified Copy	& □ \$160.00 Filing Fee, Certificate of Status & Certified Copy			

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	ABREAT REPORTED TRANSPORT	•		
1. CALLE TRES LLC	cign Limited Liability Company; mus	et include "Limited Li	ability Company " " I C " or	MIC W
(Manie of Pose	eigh Elimica Elabhity Company, mus	st incinde Limited 13	ability Company, D.E.C., or	1,100. )
(If name unavailable, enter a Liability Company," "L.L.C,	iternate name adopted for the purpose " or "LLC.")	e of transacting busine	ess in Florida. The alternate nar	me must include "Limited
2. DELAWARE		3. 36-4798807		
(Jurisdiction under the law company is organized)	of which foreign limited liability	J	(FEI number, if applicable	<u> </u>
4	(Date first transacted busines	ss in Florida if prior	io registration.)	_
	(See sections 605.0904 & 605.6	0905, F.S. to determine	ne penalty liability)	
5. 210 East 49th Street, N	New York, NY 10017			
	(Street Address of P	'rincipal Office)		2015 OCT
6. 210 East 49th Street, N		• • • • • • • • • • • • • • • • • • • •		FG 6
0				
	(Mailing A	Address)		- SSE
7. Name and street addres	ss of Florida registered agent: (P.	O. Box <u>NOT</u> accer	ntable)	MO TO
Name:	Corporation Service Company		_	9:2
Office Address:	1201 Hays Street		_	CP S
	Tallahassee		, Florida <u>32301-2525</u> (Zip code)	
	(City)	<u></u> _	(Zip code)	_
designated in this applica	gistered agent and to accept serv. tion, I hereby accept the appoints	ment as registered	agent and agree to act in thi	is capacity. I further agree
	ons of all statutes relative to the p my position as registered agent.	proper and complet	te performance of my duties	s, and I am familiar with an
necept me obligations of .	ny position no rogister en ngenti		Mo	elissa Zender
	(Registe	ered agent's signature	Asst.	Vice President
	, ,		,	
<del>-</del>	ecity and address of the person(s) and Jenna Fagnan, Manager: 210			
			YEW 101k, 191 10017	
	Park Avenue, 17th Floor, New Y			· · · · · · · · · · · · · · · · · · ·
Guillaume Thomas, Mana	iger: 250 Park Avenue, 17th Floo	or, New York, NY	10177	
			ign language, a translation of	
	Signature o	of an authorized perso	ac	-
	in accordance with section 605.0: the Department of State constitut			
	Sharon Mayers			

Typed or printed name of signee

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CALLE TRES 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 THIRTEENTH DAY OF OCTOBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CALLE TRES LLC"

WAS FORMED ON THE SECOND DAY OF DECEMBER, A.D. 2014.

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

Authentication: 10230851

Date: 10-13-15

5649740 8300 SR# 20150490299