

M23000003560

(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:

W23-36367

Office Use Only



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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 16, 2023

CSC

SUBJECT: CELINE, INC.
Ref. Number: W23000036367

RESUBMIT
Please give original
submission date as file date.

We have received your document for CELINE, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

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) 245-6051.

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor

Letter Number: 423A00006184

RECEIVED
2023 MAR 20 PM 12:23
DIVISION OF CORPORATIONS



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations
From: Alexxis Weiland-Sorenson
Ext: 61592
Date: 03/16/23
Order #: 589356-2
Re: Kenzo Paris USA LLC
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$155.00 - FL State Account Number:
I20000000195

AUTHORIZATION:

A handwritten signature in black ink, appearing to read 'Alexxis Weiland-Sorenson', is written over the word 'AUTHORIZATION:'.

Please take the following action:

File in your office on basis

Issue Proof of Filing

ISSUE CERTIFIED COPY

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

**TO: Registration Section
Division of Corporations**

SUBJECT: KENZO PARIS USA LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MARJORIE KIPP, PARALEGAL
Name of Person

LVMH MOET HENNESSY LOUIS VUITTON INC.
Firm/Company

19 EAST 57TH STREET
Address

NEW YORK NY 10022
City/State and Zip Code

Marjorie.Kipp@lvmh.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

<u>JAIME GERSON, VP & CONTROLLER</u>	at (<u>646</u>	<u>346 7517</u>	
Name of Contact Person		Area Code	Daytime Telephone Number	

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION 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:

1. KENZO PARIS 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. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")

2. DELAWARE 3. 81-2017643
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. MARCH 1, 2023
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 598 MADISON AVENUE 6. c/o LVMH Moet Hennessy Louis Vuitton Inc.
(Street Address of Principal Office) (Mailing Address)
NEW YORK NY 10022 19 EAST 57TH ST - LEGAL DEPT.
NEW YORK NY 10022-2506

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (Zip code)

Registered agent's acceptance:

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 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.

Corporation Service Company

By: [Signature]
(Registered agent's signature)

2023 MAR 16 AM 10:27

FILED

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

☒ Manager Name: Sylvain Blanc
☐ Member Address: 598 Madison Ave
☐ Authorized New York NY 10022
Person
☐ Other ☐ Other

Title or Capacity: **Name and Address:**

☐ Manager Name: Marie-Noelle Favard
☐ Member Address: 598 Madison Ave
☒ Authorized New York NY 10022
Person
☐ Other ☐ Other

☒ Manager Name: Luu Giang Quynh Chau
☐ Member Address: 598 Madison Ave
☐ Authorized New York NY 10022
Person
☐ Other ☐ Other

☐ Manager Name: Marie-Noelle Favard
☐ Member Address: 598 Madison Ave
☒ Authorized New York NY 10022
Person
☐ Other ☐ Other

☐ Manager Name: LVMH Inc.
☒ Member Address: 19 East 57th Street
☐ Authorized New York NY 10022-2506
Person
☐ Other ☐ Other

☐ Manager Name: Rodney C. Pratt
☐ Member Address: 19 East 57th Street
☒ Authorized New York NY 10022
Person
☐ 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.

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Signature of an authorized person

RODNEY C PRATT

Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KENZO PARIS 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 EIGHTH DAY OF MARCH, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KENZO PARIS USA LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF MARCH, A.D. 2016.

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



6002173 8300

SR# 20230907110

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202862861

Date: 03-08-23