H05000040801 3

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 FEB 17 PM 3:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000010004

1. Corporation Name
Valentino Boutique Palm Beach, Inc.

REINSTATEMENT 04-05
MRD

2. Principal Office Address	3. Mailing Office Address
11 West 42 Street	600 Madison Avenue
Suite, Apt. #, etc.: 26th Floor	Suite, Apt. #, etc.: 12th Floor
City & State: New York, NY	City & State: New York, NY
Zip: 10036 Country: USA	Zip: 10022 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 02/08/1994

5. FEI Number: 13-3810054 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☑ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable): 1201 Hays Street

Suite, Apt. #, Etc.:

City: Tallahassee State: FL Zip Code: 32301

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Deborah D Skipper Deborah D. Skipper Asst. V. Pres. Date: 2/17/2005
REGISTERED AGENT MUST SIGN

CR2E031 (1/04)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres	Graziano De Boni	11 West 42 Street 26th Fl.	New York, NY 10036
Sec	George M. Pavia	600 Madison Avenue 12th Fl.	New York, NY 10022
Dir	Graziano De Boni	11 West 42 Street 26th Fl.	New York, NY 10036
Dir	Matteo Marzotto	11 West 42 Street 26th Fl.	New York, NY 10036
Dir	Luca Coin	11 West 42 Street 26th Fl.	New York, NY 10036

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. 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: _____ FEB 4/05 212-980 3500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

282

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000040801 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)205-0384

From:
Account Name : CORPORATION SERVICE COMPANY / SAR
Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)558-1575

CORPORATION REINSTATEMENT

VALENTINO BOUTIQUE PALM BEACH, INC.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	$908.75

Electronic Filing Menu Corporate Filing Public Access Help

Please give original submission (2-17) date as file date. See proof of pay (attached)