OMB No. 1513-0020 (01/31/2009)

| FOR TTB USE ONLY   |                                   |   | DEPARTMENT OF THE TREASURY  |  |  |  |
|--|-----------------------------------|---|---|--|--|--|
| TTB ID   |                                   |   | ALCOHOL AND TOBACCO TAX AND TRADE BUREAU  APPLICATION FOR AND   |  |  |  |
| 08344001000214   |                                   |   |   |  |  |  |
|  |                                   |   | CE  | RIFICATION/E   | XEMPTION OF LABEL/BOTTLE   |  |
| 1. REP. ID. NO. (If any)                                       | СТ                                | OR  | Ī   | (See Instructions and  | APPROVAL Paperwork Reduction Act Notice on Back)   |  |
| II. KEF. ID. NO. (II ally)                                     | 679                               | 50  |   | (Occ monucions and   | aperwork Reduction Act Notice on Backy   |  |
|  | 073                               | 30  |   |  |  |  |
|  |                                   |   |   |  |  |  |
|  |                                   | F   | PART  | I - APPLICATION  |  |  |
| 2. PLANT<br>REGISTRY/BASIC                                     | REGISTRY/BASIC PRODUCT (Required) |   | 8. NAME AND ADDRESS OF APPLICANT AS SHOWN ON PLANT<br>REGISTRY, BASIC PERMIT OR BREWER'S NOTICE. INCLUDE APPROVED<br>DBA OR TRADENAME IF USED ON LABEL (Required) |  |  |  |
| PERMIT/BREWER'S NO. (Required)                                 |                                   | Domestic  |   | TOR TRADENAME IF 03  | SED ON LABEL (Nequired)  |  |
| NY-I-1727  | ✓ .                               | <b>✓</b> Imported                                 |   | W, LTD.<br>2 PLANDOME RD , STE. 1                              | 100  |  |
| 4. SERIAL NUMBER (Required)                                    | 5. TYPE OF PRODUCT (Required)     |   | MA  | NHASSET NY 11030   |  |  |
| 081074   | WINE                              |   | CA  | CAFFO BEVERAGE (Used on label)                                 |  |  |
|  | ✓ 1                               | DISTILLED SPIRITS                                 |   | ,  | *  |  |
|  |                                   | MALT BEVERAGE                                     |   |  |  |  |
|  |                                   |   |   |  |  |  |
|  |                                   |   |   |  |  |  |
| 6. BRAND NAME (Required)                                       |                                   |   | 8a. N   | MAILING ADDRESS, IF D  | DIFFERENT  |  |
| DOREMI   |                                   |   |   |  |  |  |
| 7. FANCIFUL NAME (If a   | ny)                               |   |   |  |  |  |
| 9. EMAIL ADDRESS   |                                   | 10. FORMULA/SOI<br>(If any)                       | P NO.   | 11. LAB. NO. & DATE /<br>PREIMPORT NO. &                       | 18. TYPE OF APPLICATION  |  |
| ARODRIGUEZ@MHWLTI  | D.COM                             | (II ariy)   |   | DATE (If any)  | (Check applicable box(es))   |  |
|  |                                   |   |   |  | a. CERTIFICATE OF LABEL APPROVAL   |  |
| 12. NET CONTENTS   |                                   | 13. ALCOHOL                                       |   | 14. WINE   | - SENTIONES ENSE ALTROVAL  |  |
| 375 MILLILITERS  |                                   | CONTENT   |   | APPELLATION IF ON LABEL  | b. CERTIFICATE OF EXEMPTION FROM LABEL   |  |
|  |                                   | 17  |   | LADEL  | APPROVAL  "For sale in only" (Fill in State  |  |
|  |                                   |   |   |  | abbreviation.)   |  |
| 15. WINE VINTAGE DATE IF ON 10 LABEL                           |                                   |   |   | 17. FAX NUMBER   | C. DISTINCTIVE LIQUOR BOTTLE APPROVAL. TOTAL BOTTLE CAPACITY BEFORE CLOSURE  |  |
|  |                                   | (516) 869-9170                                    |   | (516) 869-3833   | (Fill in amount)   |  |
|  |                                   |   |   |  | d  |  |
|  |                                   |   |   |  | RESUBMISSION AFTER REJECTION TTB ID. NO08297001000276  |  |
|  |                                   |   |   |  |  |  |
| OTHER THAN THE LABL  | ES AFF<br>IST BE N                | IXED BELOW, OR (<br>NOTED HERE EVEN               | b) BL(<br>NF IT   | OWN, BRANDED OR EMI<br>DUPLICATES PORTIONS                     | THE CONTAINER (e.g., caps, celoseals, corks, etc.) BOSSED ON THE CONTAINER (e.g., net contents S OF THE LABELS AFFIXED BELOW. ALSO, ELS.   |  |
|  |                                   | PART II -   | APP   | LICANT'S CERTIFIC  | CATION   |  |
| and belief; and, that the re<br>the content of the contained   | presenta<br>ers to wh             | ations on the labels a<br>ich these labels will b | ttache<br>be app  | ed to this form, including sublied. I also certify that I have | on are true and correct to the best of my knowledge upplemental documents, truly and correctly represent ve read, understood and complied with the e/Exemption of Label/Bottle Approval. |  |
| 20. DATE OF APPLICANT OR APPLICATION (Application was e-filed) |                                   |   |   | HORIZED AGENT  | 22. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT  |  |
| 12/09/2008   |                                   |   |   |  | ALEXANDRA RODRIGUAZ  |  |
| ,  |                                   | PAF   | RT III  | - TTB CERTIFICAT   | E  |  |
| This certificate is issued form.                               | subject                           | to applicable laws                                | , regu  | ulations and conditions  | as set forth in the instructions portion of this   |  |
|  | AUTHO                             | RIZED SIGNATURI                                   | E, ALC  | COHOL AND TOBACCO  | TAX AND TRADE BUREAU   |  |
| 12/16/2008   | ۷.                                |   |   |  |  |  |

| FOR TTB USE ONLY   |                     |  |  |  |  |  |
|--|---------------------|--|--|--|--|--|
| QUALIFICATIONS   | EXPIRATION DATE (If |  |  |  |  |  |
| The disclosure of allergens used in this product is voluntary, pending final rulemaking (See Notice No. 62, 71 FR 42329). However; any reference made to allergens must declare all allergens used in the production of this product, including fining or processing agents. | any)                |  |  |  |  |  |
| STATUS   |                     |  |  |  |  |  |
| THE STATUS IS APPROVED.  |                     |  |  |  |  |  |
| CLASS/TYPE DESCRIPTION   |                     |  |  |  |  |  |
| OTHER LIQUEUR (CREMES OR CREAMS)   |                     |  |  |  |  |  |
|  |                     |  |  |  |  |  |

AFFIX COMPLETE SET OF LABELS BELOW

Image Type: Brand (front) Actual Dimensions: 2.54 inches W X 2.91 inches H



Image Type: Neck Actual Dimensions: 2.03 inches W X 2.05 inches H



Image Type: Back Actual Dimensions: 3.25 inches W X 4.81 inches H

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TTB F 5100.31 (6/2006) PREVIOUS EDITIONS ARE OBSOLETE

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