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				
10012001000116			C	CERTIFICATION/EXEMPTION OF LABEL/BOTTLE				
			ľ	APPROVAL				
1. REP. ID. NO. (If any)	СТ	OR	1	(See Instructions and	_	perwork Reduction Act Notice on Back)		
	301	41						
PART I - APPLICATION								
2. PLANT	CE OF	11	8. NAME AND ADDRESS OF APPLICANT AS SHOWN ON PLANT					
REGISTRY/BASIC PERMIT/BREWER'S			REGISTRY, BASIC PERMIT OR BREWER'S NOTICE. INCLUDE APPROVED DBA OR TRADENAME IF USED ON LABEL (Required)					
NO. (Required)	✓ Dom	Domestic				, , ,		
DSP-SC-15001	_ Impo	Imported		TERRESSENTIA, LLC 4286 PACE ST				
4. SERIAL NUMBER (Required)	1	5. TYPE OF PRODUCT (Required)		N CHARLESTON SC 29405				
100025	WINE		J(JOKASPIRITS (Used on label)				
	✓ DISTILLED SF							
	MAL	T BEVERAGE						
6. BRAND NAME (Required)		82	8a. MAILING ADDRESS, IF DIFFERENT					
VETS				,	-			
7. FANCIFUL NAME (If a	ny)		-					
9. EMAIL ADDRESS	10. F	ORMULA/SOP	NO.	11. LAB. NO. & DATE /	18.	. TYPE OF APPLICATION		
CHIP@TERRESSENTIA.COM (If an				PREIMPORT NO. &		heck applicable box(es))		
V-1-W		-W	DATE (If any)			a.		
12. NET CONTENTS 13. ALCOHOL		LCOHOL	14. WINE		1	CERTIFICATE OF LABEL APPROVAL		
1 LITER		CONTENT		APPELLATION IF ON LABEL		b. CERTIFICATE OF EXEMPTION FROM LABEL		
1.75 LITERS 750 MILLILITERS		40%ALC/VOL				APPROVAL "For sale in only" (Fill in State		
						abbreviation.)		
15. WINE VINTAGE DATE IF ON LABEL		16. PHONE NUMBER		17. FAX NUMBER		C. DISTINCTIVE LIQUOR BOTTLE APPROVAL. TOTAL BOTTLE CAPACITY BEFORE CLOSURE		
		(843) 225-3100		(843) 225-3107		(Fill in amount)		
						d. RESUBMISSION AFTER REJECTION		
						TTB ID. NO		
19 SHOW ANY WORDIN	G (a) APPE	ARING ON MAT	FRI/	 	THE	E CONTAINER (e.g., caps, celoseals, corks, etc.)		
OTHER THAN THE LABL	.EŠ ÁFFIXE	D BELOW, OR (b) B	LOWN, BRANDED OR EM	ИВΟ	SSED ON THE CONTAINER (e.g., net contents		
				EXT APPEARING ON LAB		F THE LABELS AFFIXED BELOW. ALSO,		
		PART II -	AP	PLICANT'S CERTIFI	ICA	TION		
						are true and correct to the best of my knowledge		
						lemental documents, truly and correctly represent ead, understood and complied with the		
						xemption of Label/Bottle Approval.		
20. DATE OF 21. SIGNATURE OF APPLICANT OR				AUTHORIZED AGENT		22. PRINT NAME OF APPLICANT OR		
APPLICATION (Application was e-filed)						AUTHORIZED AGENT CARY ALEXANDRE		
This contificate is income	oublest t-			III - TTB CERTIFICA		oot forth in the instructions next on a fabir		
This certificate is issued form.	subject to	applicable laws	s, re	guiations and conditions	as	set forth in the instructions portion of this		
23. DATE ISSUED 24. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU								
Sarah X. Johnson								
	NZ.Juh	No	en					
		U						
				ND TTD 1105 01111				
I			FΟ	R TTB USE ONLY				

FOR TTB USE ONLY					
QUALIFICATIONS	EXPIRATION DATE (If any)				
STATUS					
THE STATUS IS APPROVED.					
CLASS/TYPE DESCRIPTION					
VODKA 80-90 PROOF					

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OMB No. 1513-0020

AFFIX COMPLETE SET OF LABELS BELOW

Image Type: Back

Actual Dimensions: 2.25 inches W X 4.5 inches H



Image Type: Brand (front)

Actual Dimensions: 2.25 inches W X 4.5 inches H



Image Type: Neck

Actual Dimensions: 4.8 inches W X 0.7 inches H



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

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