



**TEXAS ALCOHOLIC BEVERAGE COMMISSION  
CERTIFICATE OF APPROVAL OF LABELS FOR  
DISTILLED SPIRITS**

**Date: November 12, 2012**

**Label Certificate Number: 824452**

**Pursuant to the application of : KOBRAND CORPORATION  
Holder of permit/license number : S403461**

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**Brand : BELLE DE BRILLET PEAR LIQUEUR (USE-UP EXPIRES  
1/31/2013)  
Class : IMPORTED FRUIT FLAVORED LIQUEURS  
Vintage : N/A  
Appellation : N/A  
Style : N/A  
Size(s) : 750-375ML  
Container Type : BOTTLE  
Container Material : GLASS  
Stated Alc. Content : 30% ALC/VOL  
Tested Alc. Content : NA  
TTB Number : 07043003000004**

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**are hereby approved with the same conditions and restrictions as the Federal Certificate of Label Approval (COLA) issued by the Department of Treasury (TTB). If label changes require a new Federal COLA(s) to be obtained, new Texas label approval will also be required.**

**This certificate shall not operate to relieve any person from liability for any violation of the Federal Alcohol Administration Act, the Texas Alcoholic Beverage Code, or any Rules and Regulations thereunder, resulting from the failure of any container bearing the labels herein approved, or the contents of such container, to conform to the statements and representations made on such labels.**

**Label Approval Section  
Tax Division  
[Label.Approval@tabc.state.tx.us](mailto:Label.Approval@tabc.state.tx.us)**

**c/o KOBRAND CORPORATION  
1 MANHATTANVILLE RD BLDG 1  
4TH FLOOR  
PURCHASE, NY 10577**



# TABC

TEXAS ALCOHOLIC BEVERAGE COMMISSION  
service ★ courtesy ★ integrity ★ accountability

## TEXAS ALCOHOLIC BEVERAGE COMMISSION

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

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                      |                                                                                                                                                                                                                                                             |                                                                                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| TTB ID<br>07043-003-000004                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                      | <b>DEPARTMENT OF THE TREASURY</b><br><b>ALCOHOL AND TOBACCO TAX AND TRADE BUREAU</b><br><b>APPLICATION FOR AND CERTIFICATION/EXEMPTION OF</b><br><b>LABEL/BOTTLE APPROVAL</b><br><small>(See Instructions and Paperwork Reduction Act Notice Below)</small> |                                                                                |
| 1. REP. ID. NO. (If any)                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                      | CT <u>651</u>                                                                                                                                                                                                                                               | OR <u>51</u>                                                                   |
| 2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required)<br>IL-1-970                                                                                                                                                                                                                                                                                                                                                                                                   |                                      | 3. SOURCE OF PRODUCT (Required)<br><input type="checkbox"/> Domestic <input checked="" type="checkbox"/> Imported                                                                                                                                           |                                                                                |
| 4. SERIAL NUMBER (Required)<br>YEAR: 0 7 - 1 8 1 4                                                                                                                                                                                                                                                                                                                                                                                                                   |                                      | 5. TYPE OF PRODUCT (Required)<br><input type="checkbox"/> WINE<br><input checked="" type="checkbox"/> DISTILLED SPIRITS<br><input type="checkbox"/> MALT BEVERAGES                                                                                          |                                                                                |
| 6. BRAND NAME (Required)<br>BRILLET                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                      | 8. NAME AND ADDRESS OF APPLICANT AS SHOWN ON PLANT REGISTRY, BASIC PERMIT, OR BREWER'S NOTICE. INCLUDE APPROVED DBA OR TRADENAME IF USED ON THE LABEL (Required)<br>A. HARDY USA LTD<br>1400 E. TOUHY AVE, STE 150<br>DES PLAINES, IL 60018                 |                                                                                |
| 7. FANCIFUL NAME (If any)<br>BELLE DE BRILLET                                                                                                                                                                                                                                                                                                                                                                                                                        |                                      | 8a. MAILING ADDRESS, IF DIFFERENT                                                                                                                                                                                                                           |                                                                                |
| 9. EMAIL ADDRESS<br>MTaskin@ahardyusa.com                                                                                                                                                                                                                                                                                                                                                                                                                            |                                      | 10. FORMULA/SOP NO. (If any)                                                                                                                                                                                                                                | 11. LAB. NO. & DATE/PRE-IMPORT NO. & DATE (If any)<br>02235004004000025/ 10-02 |
| 12. NET CONTENTS<br>750ml                                                                                                                                                                                                                                                                                                                                                                                                                                            | 13. ALCOHOL CONTENT<br>60 <u>30%</u> | 14. WINE APPELLATION (If on label)                                                                                                                                                                                                                          |                                                                                |
| 15. WINE VINTAGE DATE (If on label)                                                                                                                                                                                                                                                                                                                                                                                                                                  | 16. PHONE NUMBER<br>847 298 2358     | 17. FAX NUMBER<br>847 298 2714                                                                                                                                                                                                                              |                                                                                |
| 18. TYPE OF APPLICATION (Check applicable box(es))<br>a. <input checked="" type="checkbox"/> CERTIFICATE OF LABEL APPROVAL<br>b. <input type="checkbox"/> CERTIFICATE OF EXEMPTION FROM LABEL APPROVAL<br>"For sale in _____ only" (Fill in State abbreviation)<br>c. <input type="checkbox"/> DISTINCTIVE LIQUOR BOTTLE APPROVAL. TOTAL BOTTLE CAPACITY BEFORE CLOSURE (Fill in amount)<br>d. <input type="checkbox"/> RESUBMISSION AFTER REJECTION<br>TTB ID _____ |                                      |                                                                                                                                                                                                                                                             |                                                                                |
| 19. SHOW ANY WORDING (a) APPEARING ON MATERIALS FIRMLY AFFIXED TO THE CONTAINER (e.g., caps, celloseals, corks, etc.) OTHER THAN THE LABELS AFFIXED BELOW, OR (b) BLOWN, BRANDED OR EMBOSSED ON THE CONTAINER (e.g., net contents, etc.). THIS WORDING MUST BE NOTED HERE EVEN IF IT DUPLICATES PORTIONS OF THE LABELS AFFIXED BELOW. ALSO, PROVIDE TRANSLATIONS OF FOREIGN LANGUAGE TEXT APPEARING ON LABELS.                                                       |                                      |                                                                                                                                                                                                                                                             |                                                                                |

### PART II - APPLICANT'S CERTIFICATION

Under the penalties of perjury, I declare: that all statements appearing on this application are true and correct to the best of my knowledge and belief; and, that the representations on the labels attached to this form, including supplemental documents, truly and correctly represent the content of the containers to which these labels will be applied. I also certify that I have read, understood and complied with the conditions and instructions which are attached to an original TTB F 5100.31, Certificate/Exemption of Label/Bottle Approval.

|                                     |                                                                       |                                                                 |
|-------------------------------------|-----------------------------------------------------------------------|-----------------------------------------------------------------|
| 20. DATE OF APPLICATION<br>02-08-07 | 21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT<br><i>Marta Taskin</i> | 22. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT<br>MARTA TASKIN |
|-------------------------------------|-----------------------------------------------------------------------|-----------------------------------------------------------------|

### PART III - TTB CERTIFICATE

This certificate is issued subject to applicable laws, regulations and conditions as set forth in the instructions portion of this form.

|                                       |                                                                 |
|---------------------------------------|-----------------------------------------------------------------|
| 23. DATE ISSUED<br><b>FEB 27 2007</b> | 24. AUTHORIZED SIGNATURE<br><i>Angela M. Gabel, Comptroller</i> |
|---------------------------------------|-----------------------------------------------------------------|

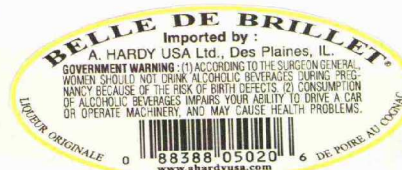
### FOR TTB USE ONLY

|                                                                                                                                                                            |                                                                                                                                                   |                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| <b>QUALIFICATIONS</b><br>9. WHEN NEW LABELS ARE PRINTED, ALL MANDATORY INFORMATION EXCLUDING THE ALCOHOL CONTENT MUST APPEAR IN PRINTING NOT SMALLER THAN TWO MILLIMETERS. | 10. WHEN NEW LABELS ARE PRINTED, ALL OF THE MANDATORY INFORMATION MUST APPEAR IN READILY LEGIBLE PRINTING ON A COMPLETELY CONTRASTING BACKGROUND. | EXPIRATION DATE (If any) |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|

AFFIX COMPLETE SET OF LABELS BELOW (See General Instructions 4, 6 and 7)



Front



Back