



TEXAS ALCOHOLIC
BEVERAGE COMMISSION
Texans Helping Businesses & Protecting Communities

PRODUCT REGISTRATION CERTIFICATE FOR WINE

Date: January 12, 2021

Label Certificate Number: 1105968

Pursuant to the application of : UNION DE COOPERATIVES FONCALIEU

Holder of permit/license number : S762538

Brand : LES AMOURS D'HAUT GLEON ROSE PAYS D'OC IGP, FRANCE
Fanciful Name : N/A
Vineyard : N/A
Class : ROSE WINE: GRENACHE, SYRAH
Vintage : VV
Appellation : PAYS D'OC IGP, FRANCE
Size(s) : 50ML-58L
Stated Alc. Content : 13.5% ALC/VOL
Tested Alc. Content : N/A
TTB Number : 20336002000015

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 to be obtained, new Texas product registration will also be required.

The certificate issued for this product is for use on containers having the same capacity as represented hereon.

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 label herein approved, or the contents of such container, to conform to the statements and representations made on such label.

APPROVAL OF THIS PRODUCT DOES NOT SIGNIFY COMPLIANCE WITH TABC'S CODE AND RULES.

Product Registration

Excise Tax and Marketing Practices Division

Product.Registration@tabc.texas.gov

c/o UNION DE COOPERATIVES FONCALIEU
DOMAINE DE CORNEILLE ARZENS
, 11290



TEXAS ALCOHOLIC BEVERAGE COMMISSION

Texas Helping Businesses & Protecting Communities

OMB No. 1513-0020

	
1. REP. ID. NO. (If any) 1014	CT 80A OR 51
2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required) TX-I-15245	3. SOURCE OF PRODUCT (Required) ☐ Domestic ☒ Imported
4. SERIAL NUMBER (Required) YEAR: 20 - 90	5. TYPE OF PRODUCT (Required) ☒ WINE ☐ DISTILLED SPIRITS ☐ MALT BEVERAGES
6. BRAND NAME (Required) Les Amours d' Haut Gleon	
7. FANCIFUL NAME (If any)	
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) United Wine and Spirits LLC 455 W 38th Street Houston, Texas 77018	
8a. MAILING ADDRESS, IF DIFFERENT	
9. FORMULA	10. GRAPE VARIETAL(S) <i>Wine only</i> Grenache, Syrah
11. WINE APPELLATION (If on label) Pays D' Oc	
12. PHONE NUMBER (713) 696-9463	13. EMAIL ADDRESS fflynn15@aol.com
14. TYPE OF APPLICATION (Check applicable box(es)) a. ☒ CERTIFICATE OF LABEL APPROVAL b. ☐ CERTIFICATE OF EXEMPTION FROM LABEL APPROVAL *For sale in _____ only* (Fill in State abbreviation) c. ☐ DISTINCTIVE LIQUOR BOTTLE APPROVAL. TOTAL BOTTLE CAPACITY BEFORE CLOSURE (Fill in amount) d. ☐ RESUBMISSION AFTER REJECTION TTB ID _____	
15. SHOW ANY INFORMATION THAT IS BLOWN, BRANDED, OR EMBOSSED ON THE CONTAINER (e.g., net contents) ONLY IF IT DOES NOT APPEAR ON THE LABELS AFFIXED BELOW. ALSO, SHOW 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. I consent to the return of processed applications in the manner indicated on this application and set forth in the applicable instructions.

16. DATE OF APPLICATION 11-23-2020	17. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT 	18. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT John Z. Saladino, Managing Member
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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.

19. DATE ISSUED 12/02/2020	20. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU Anisha A. Richards Digitally signed by Anisha A. Richards Date: 2020.12.02 10:01:32 -05'00'
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FOR TTB USE ONLY

QUALIFICATIONS

TTB has not reviewed this label for type size, characters per inch or contrasting background. The responsible industry member must continue to ensure that the mandatory information on the actual labels is displayed in the correct type size, number of characters per inch, and on a contrasting background in accordance with the TTB labeling regulations, 27 CFR parts 4, 5, 7, and 16, as applicable.

EXPIRATION DATE (If any)

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

