FOR TTB USE ONLY				DEPARTMENT OF THE TREASURY		
TTB ID				ALCOHOL AND TOBACCO TAX AND TRADE BUREAU APPLICATION FOR AND		
25245001000131			CERTIFICATION/EXEMPTION OF LABEL/BOTTLE APPROVAL			
1. REP. ID. NO. (If any) CT			OR	(See Instructions and Paperwork Reduction Act Notice on Back)		
		81	1 1 1			
				DARTI ARI	DI IOATION	
PART I - APPLICATION						
2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required) NY-I-15266		PRODUCT	3. SOURCE OF PRODUCT (Required) Domestic			PPLICANT AS SHOWN ON PLANT REGISTRY, NOTICE. INCLUDE APPROVED DBA OR BEL <i>(Required)</i>
141110200				THE CLUSTER USA, OLE IMPORTS LLC 56 HARRISON ST SUITE 405		
4. SERIAL NUMBER (Required)		5. TYPE OF PRODUCT (Required)		NEW ROCHELLE NY 10801		
250901		WINE		OLE & OBRIGADO (Used on label)		
		DISTILL	DISTILLED SPIRITS			
		MALT B	MALT BEVERAGE			
6. BRAND NAME (Required)				8a. MAILING ADDRESS, IF DIFFERENT		
FITAPRETA					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
7. FANCIFUL N	AME (If	anv)		1		
O ANCESTRAL						
). FORMULA 10. GRAPE VARIETAL(S) ((Wine Only)	14. TYPE OF APP	LICATION (Check applicable box(es))
		N/A	()	, ,,		
					a. CER	TIFICATE OF LABEL APPROVAL
I1. WINE APPELLATION (If on label) VINHO REGIONAL ALENTEJANO						TIFICATE OF EXEMPTION FROM LABEL APPROVAL sale in only" (Fill in State abbreviation.)
12. PHONE NUN	/IBER	13. EMAIL A	DDRESS		C. DIST	INCTIVE LIQUOR BOTTLE APPROVAL. TOTAL BOTTLE ACITY BEFORE CLOSURE (Fill in amount)
(805) 291-1489		COMPLIAN	ICE@OLEOBF	RIGADO.COM	RES	JBMISSION AFTER REJECTION ID. NO
IT DOES NOT A	APPEAF	R ON THE LAB				HE CONTAINER (e.g., net contents) ONLY IF
APPEARING O	N LABE	:LS.				
			PART II -	APPLICAN [*]	T'S CERTIFICA	TION
knowledge and correctly repres	belief; sent the	and, that the rep content of the c	oresentations of containers to w	on the labels att hich these labe	tached to this form, els will be applied. I	on are true and correct to the best of my including supplemental documents, truly and also certify that I have read, understood and 100.31, Certificate/Exemption of Label/Bottle
16. DATE OF 17. SIGNATURE OF APPLICANT OF APPLICATION (Application was a filed)			R AUTHORIZED AGENT		18. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT	
09/02/2025 (Applic		ation was e-filed)				PATRICIO MATA
				OT III TTD	CEDTIFICATE	
Th:4:6:4-					CERTIFICATE	
i nis certificate form.	is issu	ed subject to a	ppiicable law	s, regulations	and conditions as	set forth in the instructions portion of this
19. DATE ISSUED 09/03/2025		20. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU Allisin Rofinson				
				FOR TTB U	JSE ONLY	
						

QUALIFICATIONS

EXPIRATION DATE (If any)

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.

STATUS

THE STATUS IS APPROVED.

CLASS/TYPE DESCRIPTION

TABLE WHITE WINE

AFFIX COMPLETE SET OF LABELS BELOW

Image Type:

Brand (front) or keg collar

Actual Dimensions: 3.5 inches W X 3.1 inches H



Image Type:

Back

Actual Dimensions: 3.7 inches W X 3.9 inches H

