

Certification of Natural Wine Imported into the United States

1. Producer name and address

Harel Vineyards
Kibbutz Harel 99740
Israel

2. Description of wine:

Sycra Syrah 2006 Dry red wine, Israel

3. Check applicable box:

- a. Producing country certification and laboratory analysis results completed below.
- b. Self certification by Importer completed below. An importer must be able to demonstrate the nature of the ownership or control as well as the nature of any affiliation.

4. Certification – I certify that the practices and procedures used to produce the wine described in block 2 constitute proper cellar treatment under 26 U.S.C 5382 and 27 CFR 27.140

Name and address of certifying entity

State of Israel
Inspection Service
Ministry of Industry and Trade
Wines and Alcoholic Beverages



5. Analysis for wine described in block 2

Percentage alcohol (actual) by volume: 14.5%

Total sulphur dioxide (ppm): 83 mg/l

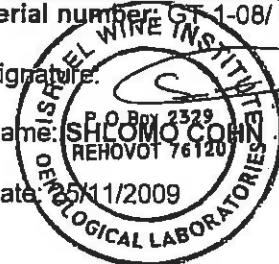
Volatile acidity (grams per 100 ml): 0.090

Serial number: GT-1-08/002

Signature:

Name: SHLOMO COHN
P.O. BOX 2329
REHOVOT 76120

Date: 25/11/2009



Name and address of laboratory:

The Israel Wine Institute
4 Haraz Street POBox 2329
Rehovot 76120
Israel

6. TTB label approval identification number (required if certification is submitted subsequent to label approval):

09314-003-000015

09314-003-000015		DEPARTMENT OF THE TREASURY ALCOHOL AND TOBACCO TAX AND TRADE BUREAU APPLICATION FOR AND CERTIFICATION/EXEMPTION OF LABEL/BOTTLE APPROVAL <i>(See Instructions and Paperwork Reduction Act Notice Below)</i>													
1. REP. ID. NO. (If any)		PART I - APPLICATION													
2. PLANT REGISTRY/BASIC PERMIT/BREWERS NO. (Required) NY-I-15369		3. SOURCE OF PRODUCT (Required) <input type="checkbox"/> Domestic <input checked="" type="checkbox"/> Imported													
4. SERIAL NUMBER (Required)		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)													
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:10%;">YEAR</th> <th style="width:10%;">-</th> <th style="width:10%;">-</th> <th style="width:10%;">-</th> <th style="width:10%;">-</th> <th style="width:10%;">-</th> </tr> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">9</td> <td style="text-align: center;">-</td> <td style="text-align: center;">0</td> <td style="text-align: center;">3</td> <td style="text-align: center;">8 0</td> </tr> </table>		YEAR	-	-	-	-	-	0	9	-	0	3	8 0	Solstars, INC. 575 Madison Ave 10th Floor, Room 69 New York NY 10022 USA	
YEAR	-	-	-	-	-										
0	9	-	0	3	8 0										
6. BRAND NAME (Required) CLOS DE GAT		5. TYPE OF PRODUCT (Required) <input checked="" type="checkbox"/> WINE <input type="checkbox"/> DISTILLED SPIRITS <input type="checkbox"/> MALT BEVERAGES													
7. FANCIFUL NAME (If any) SYCRA		8a. MAILING ADDRESS, IF DIFFERENT MHW LTD/Solstars 272 Plandome Rd Manhasset NY													
9. EMAIL ADDRESS jappel@mhwttd.com		10. FORMULA/SOP NO. (If any)													
12. NET CONTENTS 750 ML		11. LAB. NO. & DATE/PRE-IMPORT NO. & DATE (If any)													
13. ALCOHOL CONTENT 14.0%		14. WINE APPELLATION (If on label) JUDEAN HILLS													
15. WINE VINTAGE DATE (If on label) 2006		16. PHONE NUMBER 516 869-9170													
17. FAX NUMBER 516 869-3833		18. TYPE OF APPLICATION (Check applicable box(es)) a. <input checked="" type="checkbox"/> CERTIFICATE OF LABEL APPROVAL b. <input type="checkbox"/> CERTIFICATE OF EXEMPTION FROM LABEL APPROVAL "For sale in _____ only" (Fill in State abbreviation) c. <input type="checkbox"/> DISTINCTIVE LIQUOR BOTTLE APPROVAL TOTAL BOTTLE CAPACITY BEFORE CLOSURE (Fill in amount) d. <input type="checkbox"/> RESUBMISSION AFTER REJECTION TTB ID _____													
19. SHOW ANY WORDING (a) APPEARING ON MATERIALS FIRMLY AFFIXED TO THE CONTAINER (e.g., caps, cellophane, cork, 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. BRAND NAME, PRODUCER NAME, AND GRAPHICS MAY REPEAT ON CAP, CAPSULE OR BOTTLE NECK.															

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 11/09/09	21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT 	22. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT Justin Appel
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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.

23. DATE ISSUED NOV 18 2009	24. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU
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FOR TTB USE ONLY

QUALIFICATIONS

A "Certification of Natural Wine Imported into the United States" must be submitted to TTB prior to importation. For additional requirements, see 27 CFR 4.45(b) and http://www.ttb.gov/wine/wine_certs.html.

EXPIRATION DATE (If any)

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

