## F08000004190

(Re	questor's Name)	
,		
	ldress)	
(Ad	aress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP		MAIL
(Bu	siness Entity Nar	me)
`	·	•
(Do	cument Number)	
Cortified Conies	Cortificator	s of Status
Certified Copies	_ Certificates	s or Status
Special Instructions to	Filing Officer:	
		•
		İ

Office Use Only



600136204596

09/25/08--01034--002 \*\*70.00

SECRETARY OF STATE

08 SEP 25 PM 1: 0



B. McKnight SEP 2 5 2008



## **COVER LETTER**

TO: New Filing Section Division of Corporations			
SUBJECT: Native Eyewear, Inc.			
	poration - must include suffix)		
Dear Sir or Madam:			
	on for Authorization to Transact Business in Florida," ted to register the above referenced foreign corporation to		
Please return all correspondence concerning this	matter to the following:		
Donald Hubert			
(N	ame of Person)		
A.T. Cross Company			
(Fi	irm/Company)		
One Albion Road			
	(Address)		
Lincoln, RI 02865			
(City	/State and Zip code)		
For further information concerning this matter, p	elease call:		
Donald Hubert at (40	335-8125		
(Name of Person)	(Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
\$70.00 Filing Fee \$\times  S78.75 Filing Fee & Certificate of Status			

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

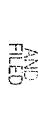
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Native Eyewear, Inc	2.			
(Enter name of corpo "Inc.," "Co.," "Corp,"	ration; must include "INCORPORATI " "Inc," "Co," or "Corp.")	ED	" "COMPANY," "CORPORATION,"	
(If name waysilable	in Florida enter alternata accuracta		adopted for the purpose of transacting business	in Florida
Rhode Island	in riorida, enter alternate corporate na	mic		in Florida)
۷.	er the law of which it is incorporated)	3.	(FEI number, if applicable)	
March 12, 2008	or the law of which it is incorporated)			
4	ncorporation)	5.	Perpetual (1)	im
-	ncorporation)		(Duration: Year corp. will cease to exist or "p	erpetuat")
6. October 2008	(Date 6 at 1 at 2			<del></del>
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
7 2361 Mason Avenue.	Suite 100, Dayton Beach, FL 32117		, ,	
/·	(Principal office	add	ress)	<del></del>
One Albion Road, Li	•		,	
	(Current mailing	add	ress)	
			·	
0.	distribution of premium eyewear and a			
(Purpose(s) of	corporation authorized in home state o	rco	ountry to be carried out in state of Florida)	<del></del>
9. Name and street ad-	dress of Florida registered agent: (	P.C	D. Box NOT acceptable)	<b>Z</b> S
Name:	C T Corporation System			
Office Address:	1200 South Pine Island Road			是 第一章
	Plantation	•••		
	(City)		(Zip code)	- 10 S3 -
10. Registered agent'	's accentance			吾吾 <u>;</u>
		rvi	ce of process for the above stated corporati	on at the place
designated in this appi	lication, I hereby accept the appoi	ntn	ent as registered agent and agree to act in	this capacity. I
juriner agree to compl and I am familiar with	ly with the provisions of all statute a and accept the obligations of my	s re no.	elative to the proper and complete perform sition as registered agent.	ince of my duties,
•	C T Corporation System	, ,	Kristen I	3etzaer
	Wat D	n	And O - Vice Pre	esident
By:	MARIAND	V.	W(X Y	

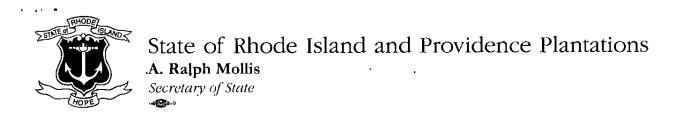
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:



A. DIREC				
Chairman: D	David G. Whalen			
	e Albion Road			
Lin	ncoln, RI 02865			
Vice Chairma	Charles R. MacDonald			
	61 Mason Avenue, Suite 100			
Da	lytona Beach, FL 32117			
Director: Tir	na C. Benik			
Address: Or	ne Albion Road			
Lir	ncoln, RI 02865	SEC	S 80	
Director:		RETA AHAS	EP 2	
		SET	Ωj	
		15.0 15.0 15.0 15.0 15.0 15.0 15.0 15.0	3	~ <u>~</u>
B. OFFICE	ERS		34 :	
	Charles R. MacDonald			
	61 Mason Avenue, Suite 100			
	ytona Beach, FL 32117			
Vice Presider	nt: Charles R. MacDonald			
	61 Mason Avenue, Suite 100			
Da	aytona Beach, FL 32117	··		
Secretary: T	Tina C. Benik			
Address: Or	ne Albion Road, Lincoln, RI 02865			
	Gary S. Simpson			
	ne Albion Road, Lincoln, RI 02865			
	necessary, you may attach an addendum to the application listing additional officers and/or	r director	rs.	
	(Signature of Director or Officer listed in number 12 of the application)			
14. Tina C.	Benik, Director			
	(Typed or printed name and capacity of person signing application)			



The Office of the Secretary of State of the State of Rhode Island and Providence Plantations, HEREBY CERTIFIES, that

## Native Eyewear, Inc.

a Rhode Island corporation, filed articles of incorporation in this office on the 12<sup>th</sup> day of March, 2008; and

IT IS FURTHER CERTIFIED that as of this date said corporation is duly organized and existing under and by virtue of the laws of the State of Rhode Island and is in good standing according to the records of this office.

SIGNED AND SEALED this twenty-third day of September, A.D. 2008.

Secretary of State

By Illia antonelli

STATE " STATE

08 SEP 25 FM 1: 42
SECRETARY OF STATE

