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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

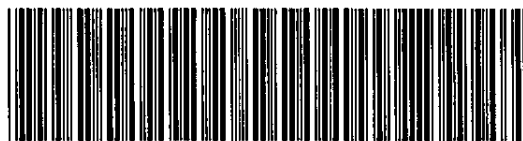
(Document Number)

Certified Copies _____

Certificates of Status _____

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12/20/16--01005--019 **87.50

FILED
16 DEC 20 PM 4:00
CLERK OF STATE
TALLAHASSEE, FLORIDA

T WASHINGTON

DEC 21 2016



Alysia A. Schramka
Direct: 312.660.9906
Aschramka@GinsbergJacobs.com

December 19, 2016

Via Federal Express

Florida Department of State
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Alan Heller Apparel, Inc. – Application to transact business in FL

To Whom It May Concern:

Enclosed please find one original cover letter, one original application to transact business in Florida, a Certificate of Good Standing from the State of Illinois and a check in the amount of \$87.50 in regards to Alan Heller Apparel, Inc.. Upon filing the enclosed, please return one filed copy of the application to transact business at your convenience. Should have any questions do not hesitate to contact me.

Sincerely,

Alysia A. Schramka
Paralegal

FILED
16 DEC 20 PM 4: 00
FEDERAL DEPT OF STATE
TALLAHASSEE, FL 32301

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALAN HELLER APPAREL, INC.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

DARRYL P. JACOBS

Name of Person

GINSBERG JACOBS LLC

Firm/Company

300 S. WACKER DRIVE SUITE 2750

Address

CHICAGO, IL 60606

City/State and Zip code

Alanheller61@me.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DARRYL P. JACOBS

312

660-9615

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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.*

ALAN HELLER APPAREL, INC.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

ILLINOIS

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

12/30/1992

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

2112 RENAISSANCE WAY, BOYNTON BEACH, FLORIDA 33426-8225

7. _____
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: ALAN HELLER

Office Address: 2112 RENAISSANCE WAY

BOYNTON BEACH, Florida 33426-8225
(City) (Zip code)

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16 DEC 20 PM 4:00
TALLAHASSEE, FLORIDA

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

10. 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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: ALAN HELLER

Address: 2112 RENAISSANCE WAY, BOYNTON BEACH, FLORIDA 33426-8225

Director: _____

Address: _____

B. OFFICERS

President: ALAN HELLER

Address: 2112 RENAISSANCE WAY, BOYNTON BEACH, FLORIDA 33426-8225

Vice President: _____

Address: _____

Secretary: SERENA HELLER

Address: 2112 RENAISSANCE WAY, BOYNTON BEACH, FLORIDA 33426-8225

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.  _____
Signature of Director or Officer

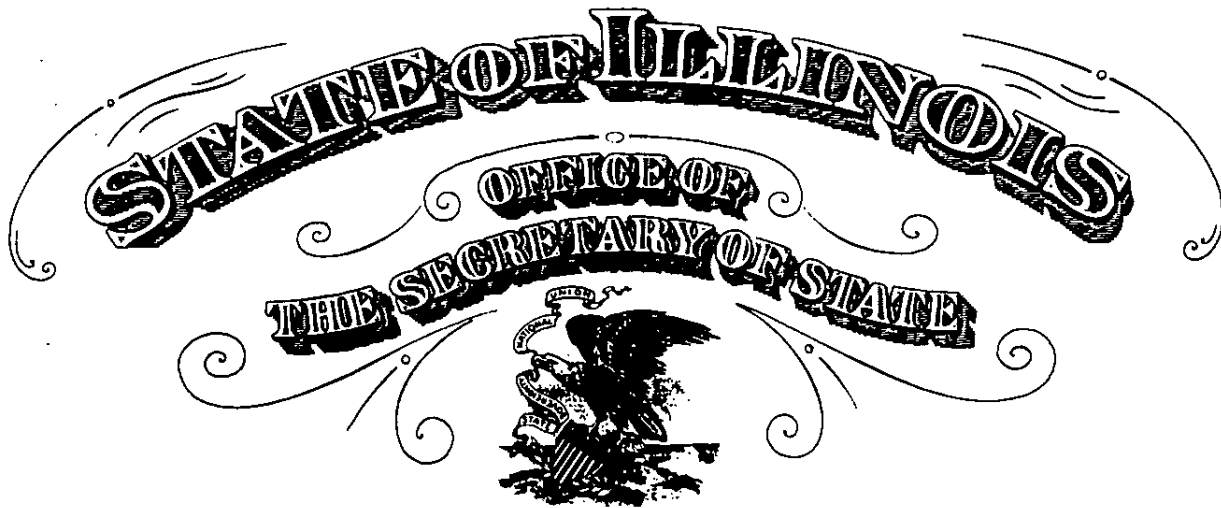
The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. ALAN HELLER, DIRECTOR

(Typed or printed name and capacity of person signing application)

File Number

5712-401-6



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

ALAN HELLER APPAREL, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON DECEMBER 30, 1992, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

FILED
16 DEC 20 PM 4:00
STATE
OF ILLINOIS
JESSE WHITE
SECRETARY OF STATE



***In Testimony Whereof, I hereto set
my hand and cause to be affixed the Great Seal of
the State of Illinois, this 19TH
day of DECEMBER A.D. 2016 .***

Jesse White

SECRETARY OF STATE

Authentication #: 1635402168 verifiable until 12/19/2017

Authenticate at: <http://www.cyberdriveillinois.com>

Return Shipment Instructions



Return Shipment Instructions

1. Place the shipping label on the container's most visible side away from seams.

2. Ship your package one of three ways:

- Use your regular scheduled pickup.
- Drop off at FedEx. Find your closest location at fedex.com/locate or by calling 1.800.GoFedEx 1.800.463.3339
- Schedule a pickup. No account number required but label information may be needed. Go to fedex.com/returnpickup for FedEx Ground labels with "G" or "PRP" or call 1.800.GoFedEx 1.800.463.3339 and say:
 - o "Return Manager" or "PRP" for FedEx Ground labels with "G" or "PRP"
 - o "Express Return" for FedEx Express labels with "E" or "Billable Stamp"

Prepare Your Package With Care.

- Use an appropriate container, cushioning materials and at least three strips of packing tape.
- If reusing packaging, remove or black out old shipping labels including their barcode(s)

Special Instructions from the merchant:

FILED
16 DEC 20 PM 4:00
FEDERAL BUREAU OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE
WASHINGTON, D.C. 20535