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07-06-2019 08:39 (010) 130536701 From: Andres Rodriguez
Division of Corporations

Florida Department of State
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : R&P ACCOUNTING AND TAXES INC
Account Number : 120170000098
Phone : (305)358-1310
Fax Number : (305)503-6701

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: arod8723@gmail.com

Foreign Limited Liability Company
CREATIVE APPAREL LLC

Certificate of Status	1
Certified Copy	1
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Estimated Charge	\$160.00

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. CREATIVE APPAREL I.L.C. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "L.L.C.")
CREATIVE APPAREL USA I.L.C.
2. DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized)
3. 30-1049561 (FEI number, if applicable)
4. N/A (Date first transacted business in Florida, if prior to registration)
5. 11930 N BAYSHORE DRIVE STE 702 (Street Address of Principal Office)
NORTH MIAMI, FL 33181
6. 11930 N BAYSHORE DRIVE STE 702 (Mailing Address)
NORTH MIAMI, FL 33181

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

Name: R&P ACCOUNTING AND TAXES INC
Office Address: 200 SE 1ST STREET SUITE 604
MIAMI, Florida 33131
(City) (Zip code)

Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company 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)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Table with 4 columns: Title or Capacity, Name and Address, Title or Capacity, Name and Address. Rows include MEMBER BERND SATZINGER, MEMBER LARA BRAGA, and MANAGER VANESSA L TABLADA.

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

Signature of an authorized person: BERND SATZINGER
Typed or printed name of signer: BERND SATZINGER

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DEPARTMENT OF STATE
TAMARA S. FERRER
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Delaware

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CREATIVE APPAREL LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF JUNE, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CREATIVE APPAREL LLC" WAS FORMED ON THE FIFTEENTH DAY OF MARCH, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



6799371 8300

SR# 20185067982

You may verify this certificate online at corp.delaware.gov/authver.shtml

Handwritten signature of Jeffrey W. Bullock, Secretary of State, in black ink over a horizontal line.

Authentication: 202854098

Date: 06-11-18