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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
01 NOV 27 PM 1:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # 332645

1. Corporation Name

Jasper Textile Corporation

REINSTATEMENT 9801

9801

2. Principal Office Address	3. Mailing Office Address
1141 Northwest HWY.#41	1141 Northwest Hwy.#41
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Jasper, Florida	City & State: Jasper, Florida
Zip: 32052 Country:	Zip: 32052 Country:

4. Date Incorporated or Qualified To Do Business In Florida: 07/17/1968

5. FEI Number: 59-1220700 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $30.00 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: CORPORATION SERVICE COMPANY

Street Address (P.O. Box Number is Not Acceptable): 1201 HAYS STREET

Suite, Apt. #, Etc.:

City: TALLAHASSEE State: FL Zip Code: 32301

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Deborah D Skipper Deborah D. Skipper Asst. V. Pres. Date: 11-27-01
REGISTERED AGENT MUST SIGN

CR2E081 (9/00)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres.	Perlmar, Louis	1372 Broadway	New York, NY
V.P.	Perlman, Gary	1372 Broadway	New York, NY
CFO	Eitellberg, Richard	1372 Broadway	New York, NY
			300004695333--4

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Richard Eitellberg, CFO 11/26/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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ACCOUNT NO. : 072100000032

REFERENCE : 210855 4300976

AUTHORIZATION : Patricia Pizzuto

COST LIMIT : $ 1058.75

ORDER DATE : November 26, 2001

ORDER TIME : 11:08 AM

ORDER NO. : 210855-005

CUSTOMER NO: 4300976

CUSTOMER: Mr. Daren Stamp
Hahn & Hessen Llp
350 Fifth Avenue
37th Floor
New York, NY 10118

RECEIVED
01 NOV 27 AM 11:29
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DOMESTIC FILINGS

NAME: JASPER TEXTILE CORPORATION

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea EXT 1114

EXAMINER'S INITIALS