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SHARON S. JONES  
25400 SOUTHWEST 139TH AVENUE  
HOMESTEAD, FLORIDA 33032

MAILING ADDRESS  
PO BOX 924292

HOMESTEAD, FLORIDA 33092-4292

SHARON S. JONES  
MEMBER OF FLORIDA & WISCONSIN BARS

TELEPHONE (305) 441-9030  
TELEFAX (305) 258-2160

## MEMORANDUM

TO: Christine L. Ramos  
Florida Mills, Inc.  
by Fed Ex  
11014 NW 33rd Street, Suite 109  
Miami, Fl. 33172

CC: Daniel Sheets  
Henderson Hutcherson McCullough, PLLC  
1000 Riverfront Parkway  
Chattanooga, TN 37402-2103  
By fax 423-265-8125

FROM: S. Jones, Esq.

RE: Authorization to do business in Florida  
**VOLUNTEER KNIT APPAREL, INC. (Volunteer)**

DATE: December 21, 2001

800004751358--7  
-01/04/02--01044--011  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

Will you please sign the enclosed Application for authorization to transact business in Florida at the spot I have marked. Then Fed Ex it, my enclosed trust check for \$87.50, the enclosed transmittal letter and the enclosed page 2 of the Application (has Gary's signature and designates him as president, etc.) to the following address ASAP!

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl. 32314

THANKS

02 JAN -4  
SECRET  
TALLAHASSEE  
FILE

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1/8

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Volunteer Knit 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", 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:

Sharon S. Jones, Attorney at Law

(Name of Person)

P. O. Box 924292

(Firm/Company)

Homestead, Fl. 33092-4292

(Address)

(City/State and Zip code)

For further information concerning this matter, please call:

Sharon S. Jones

(Name of Person)

at ( 305 ) 441-9030

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**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

FILED  
02 JAN -4 PM 8:10  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

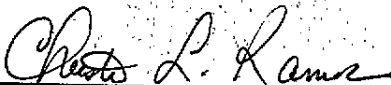
**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*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.*

1. VOLUNTEER KNIT APPAREL, INC.  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. TENNESSEE 3. .62-1334522  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 1987 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 403 Old Knoxville Hwy., New Tazewell, TN 37825  
(Principal office address)  
403 Old Knoxville HWY., New Tazewell, TN 37825  
(Current mailing address)
8. Administrative transactions for apparel manufacturing  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  
Name: Christine L. Ramos  
Office Address: 11014 NW 33rd Street, Suite 109  
Miami, Fl. Florida 33172  
(City) (Zip code)

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JAN -4 PM 8:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10. 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)

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.

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

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_**B. OFFICERS**President: Gary WestAddress: 403 Old Knoxville HwyNew Tazewell, TN 37825Vice President: Charles HarrisAddress: 403 Old Knoxville HwyNew Tazewell TN 37825Secretary: Charles HarrisAddress: 403 Old Knoxville HWY, New Tazewell, TN 37825Treasurer: Charles HarrisAddress: 403 Old Knoxville Hwy., New Tazewell TN 37825**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.13. Gary West, President  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)14. Gary West, President  
(Typed or printed name and capacity of person signing application)FILED  
02 JAN -4 PM 8:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Secretary of State**  
**Division of Business Services**  
**312 Eighth Avenue North**  
**6th Floor, William R. Snodgrass Tower**  
**Nashville, Tennessee 37243**

ISSUANCE DATE: 12/05/2001  
REQUEST NUMBER: 01339101  
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 09/29/1987  
STATUS: ACTIVE  
CORPORATE EXPIRATION DATE: PERPETUAL  
CONTROL NUMBER: 0194739  
JURISDICTION: TENNESSEE

TO:  
NORA WOLFENBARGER  
403 OLD KNOXVILLE HW  
NEW TAZEWELL, TN 37825

REQUESTED BY:  
NORA WOLFENBARGER  
403 OLD KNOXVILLE HW  
NEW TAZEWELL, TN 37825

**CERTIFICATE OF EXISTENCE**

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"VOLUNTEER KNIT APPAREL, INC."

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF  
INCORPORATION AND DURATION AS GIVEN ABOVE;  
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE  
EXISTENCE OF THE CORPORATION HAVE BEEN PAID;  
THAT THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS BEEN FILED  
WITH THIS OFFICE; AND  
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND  
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

FILED  
02 JAN -4 PM 10:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FOR: REQUEST FOR CERTIFICATE

ON DATE: 12/05/01

RECEIVED: FEES \$20.00 \$0.00

TOTAL PAYMENT RECEIVED: \$20.00

RECEIPT NUMBER: 00002967601  
ACCOUNT NUMBER: 00066657

FROM:  
VOLUNTEER KNIT APPAREL, INC.  
PO BOX 608  
NEW TAZEWELL, TN 37825-0000



*Riley C Darnell*

RILEY C. DARNELL  
SECRETARY OF STATE