F02000004198

TRANSMITTAL LETTER

	TO: Regis	tration Section of Corp	tion porations		_				
	SUBJECT:		Thr	ead	Tales lu	1 C.			
					oration - must inc				
	Dear Sir or Ma	adam:				,		02 A	
	The enclosed 'Certificate of to transact bus		and oncor	n Corporatio are submitte	n for Authorization and to register the a	on to Transact E bove referenced	Business in Flo I foreign corp	AUG 16 AM CRETA E OF ANNOESE F	FILED
	Please return a	ll correspo	ndence conc	erning this r	natter to the follow	wina			
			_	4901e	Eaus		_	9: 30 STATE LORIDA	
		· · — —	Threa	(Nar	ne of Person)				- ·
		·	4314		n/Company)	ier Co	ourt	···	• .*
			New		Address) Riche		3463		\$ ·
				(City/St	ate and Zip code)	7,15			. 12-20-00-00
	For further info					•	JO676 -07/30/02- *****87.5	!!!!!!#nr	5 109 17.50
	Curisti (Name	QUL 1 of Person)	Lowpk	iled (7. (A)	<u>97) 375</u> rea Code & Daytin	me Telephone N	ST Number)	Ξ	
Availability	STREET ADDI Registration Sec Division of Corp 409 E. Gaines St	tion orations			MAILING A Registration Division of (Section Corporations	Lagrande Capanie	Jacii Enilia	
		B2399			P.O. Box 633 Tallahassee,			padire	SS
Updater I	Enclosed is a che	ck for the	following an	ount:					
Updater (Verliyer	J \$70.00 Filing	Fee 😽	\$78.75 Filin Certificate	ig Fee & of Status	☐ \$78.75 Filing Certified Cop		87.50 Filing) Certificate of	Fee,	
Adino redge	ment DCC				<u>r</u>		Certified Cop	y y	/
P. Verifye	er DCC								

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July 31, 2002

CHRISTINE LAMPKIN THREAD TALES, INC. 4314 STOUES RIVER COURT NEW PORT RICHEY, FL 34653

SUBJECT: THREAD TALES, INC. Ref. Number: W02000022040

We have received your document for THREAD TALES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain both the street address of the principal office and the mailing address of the entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing Corporate Specialist

Letter Number: 502A00046129

REIGN 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.	Thread Tales, 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.	(State or country under the law of which it is incorporated) 3. 51-0405811 (FEI number, if applicable)		
	(State or country under the law of which it is incorporated) (FEI number, if applicable)	72	
4.	. 1-11-01 5. <u>Perpelval</u>	90.	
•	(Date of incorporation) 5. Perpelval (Duration: Year corp. will cease to exist or "perpetual")	_	=
6	Upon avalitication =	J:==	
Ο.	(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification,")	:e HA	`-
	(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	: 30	
7.	. 4314 Stones River Ct., New Part Richey, FL 34655		
	(Principal office address)		
	4314 Stones River Ct., New Port Richey, FL 34653 (Current mailing address)		
	(Current mailing address)	•	
8.	,	_	
	(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)		
	Christiane Name: <u>Fina Lampilin</u>		
	Name:		
O	Office Address: 43/4 Stoues River Ct. WewPort Richey =, Florida 34653 (City) (Zip code)		
	New Port Richey - Florida 34653		
	(City) (Zip code)		

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.

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 Address: Vice Chairman: Address: __ Director: ___ Address: Director: _ Address: **B. OFFICERS** Christiane President: Than Lampkin Vice President: Address: Secretary: Address: _ Treasurer: _ i an a isi garaga Address: _ -165 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Christian C Tha Lamplein, Chairman (Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "THREAD TALES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR ASTITUTE OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF JUNE 2002.



Darriet Smith Windson

Harriet Smith Windsor, Secretary of State

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020357245

AUTHENTICATION: 1841641

DATE: 06-20-02