# F03000002176

(Requ	estor's Name)		
(Addr	ess)		
(Addi	ess)		
(City/s	State/Zip/Phone	#)	
PICK-UP	☐ WAIT	MAIL	
(Busi	ness Entity Nam	ne)	
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



000016099570

05/01/03--01001--027 \*\*70.00

MK

FILED CONTROL VED

APR 30 M 9- 12

CLAGAS LE FLOREM THE DIVISIONS

CLAGAS LE FLOREM THE DIVISI

#### **CT** CORPORATION SYSTEM

April 30, 2003

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399



Re:

Order #: 5801470 WO

Customer Reference 1: None

Customer Reference 2: LSI Good Standing for Cre

Dear Secretary of State, Florida:

Please file the attached:

Little Switzerland, Inc. (DE) Qualification Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jeffrey J Netherton Sr. Fulfillment Specialist Jeff\_Netherton@cch-lis.com

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

### 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. Little Switzerl	and, Inc.	and the second s	
(Name of corp	oration; must include the word "INCORPOR	ATED", "COMPANY", "CORPORATION" for	
		early indicate that it is a corporation instead of a	
natural person	or partnership if not so contained in the name	e at present.)	
2 Delevere		2 66 0476514	
2. Delaware	y under the law of which it is incorporated)	3. 66-0476514 (FEI number, if applicable)	
(State of Count	y under the law of which it is incorporated)	(r Et number, it applicable)	
4. 05/03/1991	A	5. Perpetual	
	te of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
•	•		
6. Upon Qualific	<del></del>		
(Date first trans		not transacted business in Florida, insert "upon qualification.")	
	(SEE SECTIONS 607.1	501, 607.1502 and 817.155, F.S.)	
7 161-B Crown I	Bay, St. Thomas, VI 00802	en e	
· •	(Principal office	address)	
	•		
161-B Crown I	Bay, St. Thomas, VI 00802		
	(Current mailing	address)	
8. To operate and	l administer a retail business both inside and	outside the state of Florida.	
		r country to be carried out in state of Florida)	
(· 1	(·, · · · · · · · · · · · · · · · · · ·		
9. Name and st	<u>reet address</u> of Florida registered agei	nt: (P.O. Box or Mail Drop Box NOT acceptable)	
	G.T.G	-	
Name:	C T Corporation System	<del>and the second </del>	
0.00	1200 Carith Bina Island Band		
Office Address:	1200 South Pine Island Road,	·····································	
	Plantation,	- Florida 33324	
	(City)	(Zip code)	
	(Chy)	(Lip code)	
10 Registered	agent's acceptance:		
		ervice of process for the above stated corporation at the place	
		intment as registered agent and agree to act in this capacity. I	
		es relative to the proper and complete performance of my	
	familiar with and accept the obligation		
	C T Corpora	ition System	
	C i Corpora	non dystem	
_	4		
Ву			
	(Registered agent'	s signature)	
11 444 1 17	and the second s		
11. Attached is a	a certificate of existence duly authenticat	ed, 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

FL019 - 12/17/02 C T System Online

under the law of which it is incorporated.

### 12. Names and business addresses of officers and/or directors: A. DIRECTORS SEE ATTACHMENT Chairman: \_ Address: \_ Director: \_ B. OFFICERS President: \_\_ Address: \_\_ Vice President: \_\_\_ Address: \_ Secretary: \_ Address: Treasurer: Address: 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)

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

14. Patrick B. Dorsey, Director

# OFFICERS & DIRECTORS

## Name

Robert L. Baumgardner Patrick B. Dorsey James E. Quinn

Robert L. Baumgardner

Patrick J. Hopper Patrick J. Heron

Jack P. Jackson

Title
Director
Director
Director

President/
Chief Executive Officer
Chief Financial Officer/
Vice President/Treasurer
Secretary

# Business Address

161-B Crown Bay, St. Thomas, VI 00802 727 Fifth Avenue, New York, NY 10022 727 Fifth Avenue, New York, NY 10022

161-B Crown Bay, St. Thomas, VI 00802

161-B Crown Bay, St. Thomas, VI 00802

161-B Crown Bay, St. Thomas, VI 00802 1585 Broadway, New York, NY 10036 O3 APR 30 M 9: 12

## Delaware

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LITTLE SWITZERLAND, 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 AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF APRIL, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AUTHENTICATION: 2390176

030277549

8300

2263934

DATE: 04-29-03