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TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NDW TEXTILES, 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:

KAREN W BIRCHER
(Name of Person)

NDW TEXTILES, INC.
(Firm/Company)

PO BOX 648
(Address)

CRYSTAL BEACH, FL 34681-0648
(City/State and Zip code)

For further information concerning this matter, please call:

KAREN W BIRCHER at (727) 781-5700
(Name of Person) (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

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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

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. NDW TEXTILES, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. SOUTH CAROLINA 3. 57-1091734
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 7/4/2000 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. 932 PRINCE SEASIDE, PO BOX 648, CRYSTAL BEACH, FL 34681-0648
(Principal office address)

SAME AS ABOVE
(Current mailing address)

8. Sales & Marketing for industrial textiles
(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: Karen A. Bucher

Office Address: 932 PRINCE SEASIDE, PO BOX 648
Crystal Beach, Florida 34681-0648
(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.

Karen A. Bucher
(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:

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A. DIRECTORS

Chairman: JAMES A BURCHER

Address: 930 Pointe Seaside, PO BOX 648
Crystal Beach, FL 34681-0648

Vice Chairman: _____

Address: _____

Director: Karen W Burcher

Address: 930 Pointe Seaside, PO BOX 648
Crystal Beach, FL 34681-0648

Director: _____

Address: _____

B. OFFICERS

President: JAMES A BURCHER

Address: 930 Pointe Seaside, PO BOX 648
Crystal Beach, FL 34681-0648

Vice President: Karen W Burcher

Address: 930 Pointe Seaside, PO BOX 648
Crystal Beach, FL 34681-0648

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Karen W Burcher

(Signature of Director or Officer listed in number 12 of the application)

14. Karen W Burcher Vice President

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

The State of South Carolina



Office of Secretary of State Mark Hammond **Certificate of Existence**

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

NDW TEXTILES, INC.,

a corporation duly organized under the laws of the State of South Carolina on **February 8th, 2000**, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to Section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of
the State of South Carolina this 24th day of
May, 2004.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Mark Hammond

Mark Hammond, Secretary of State