F04000003887

(Requestor's Name)			
(Address)			
(Address)			
(Cit	y/State/Zip/Phone	· #)	
			
☐ PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
• •			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		
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Office Use Only

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FILED

FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 18, 2004

CHRISTINA K. LEVINE 4674 WINDSTARR DR. DESTIN, FL 32541

SUBJECT: THE COTTON LOFT INC.

Ref. Number: W04000018822

We have received your document for THE COTTON LOFT INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1150.00.

Enclosed please find a copy of section 607.1501, 617.1501, or 608.502, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a notarized affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501, 617.1501 or 608.502, Florida Statutes.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 104A00033847

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 25, 2004

CHRISTINA K. LEVINE 4674 WINDSTARR DR. DESTIN, FL 32541

SUBJECT: THE COTTON LOFT INC.

Ref. Number: W04000018822

Your corporate name is unavailable. Chapter 607.0401(4), Florida Statutes states corporate names "must be distinguishable from the names of all other entities or filings organized or registered under the laws of this state, which names are on file with the Division."

You failed to make the correction(s) requested in our previous letter.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 404A00042016

FILED

TRANSMITTAL LETTER

TRANSMITTA	L LETTER	
	2301 ART -5 15 5:03	
TO: Registration Section Division of Corporations	CLEALASTIE, FINANCE	
SUBJECT: The Cotton Lot (Name of corporation	+ Inc.	
(Name of corporation	r - must include suffix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for A "Certificate of Existence", and check are submitted to re transact business in Florida.		
Please return all correspondence concerning this matter t	o the following:	
Christina K	leune	
Christina K.	Person)	
(Firm/Con	npany)	
4674 Winds	Starr Dr.	
(Addre	ss)	
Destin Fl	32541	
(City/State ar	32541 nd Zip code)	
For further information concerning this matter, please ca	II:	
Christina Levine at (850	<u> 1896 - 1887 - 1887 - 1888 - 1888 (</u>	
(Name of Person) (Area Co	ode & Daytime Telephone Number)	
	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
409 E. Gaines St.	P.O. Box 6327	
Tallahassee, FL 32399	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 & 🙀 \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 60 REGISTER A FOREIGN CORPORATI	07.1503, FLORIDA STAT ION TO TRANSACT BUS	TUTES, THE FOLLOWING SINESS IN THE STATE OF	G IS SUBMITTED TO. D
			5 * 6 to 11 to
1. The Cotton Loft (Enter name of corporation: must include "Inc.," "Co.," "Corp." "Ine." "Co," or "Corp."	le "INCORPORATED." "C Corp.")	COMPANY," "C'ORPORAT	TONE LE LE SECTION DE LE CONTROL DE LE CONTR
(If name unavailable in Florida, enter al	ternate corporate name ado	pted for the purpose of transa	acting business in Florida)
2. Illinois	3. 3	36-4372236	
2	it is incorporated)	(FEI number, if	applicable)
4. April 20,2000	5	Demostual	
4. April 20, 2000 (Date of incorporation)	(D	uration: Year corp. will ceas	se to exist or "perpetual")
6. <u>September 200</u> (Date first transacted business in Florida			
(Date first transacted business in Florida. (SEE	. If corporation has not trans SECTIONS 607.1501, 60	nsacted business in Florida, in 7.1502 and 817.155, F.S.)	isert "upon qualification.")
7. 4674 Windstaren	e Dr. Destin (Principal office address)		
SAME			
	(Current mailing address)		
8. reseller of quilting (Purpose(s) of corporation authori			
9. Name and street address of Florid:	a registered agent: (P.C). Box or Mail Drop Box M	NOT acceptable)
Name: Christina	K. Levine	_	
Office Address: 4174 Wind	Istarr Dr	_	
Destin FL		, Florida <u>32541</u>	
(City)		(Zip code)	
10. Registered agent's acceptance: Having been named as registered agen designated in this application, I hereby further agree to comply with the provis and I am familiar with and accept the o	accept the appointment sions of all statutes relati	as registered agent and a ve to the proper and comp	gree to act in this capacity. I
Christina	K. Levine	_	

under the law of which it is incorporated.

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

(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

A. DIRECTORS
Chairman:
Address:
1001 JCT -3 10 5: 03
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
Address
B. OFFICERS
President: Christina K. Levine
Address: 4674 Windstarr Dr
Destin FL 32541
Vice President:
Address:
Secretary: Michael J. Levine
Address: 4674 Windstare Dr. Destin FL 32541
Treasurer Christina K. Levine
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Christina K. Levine
(Signature of Director or Officer listed in number 12 of the application)
14. Christina K. Levine President (Typed or printed name and capacity of person signing application)

File Number

6104-456-6



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this

29TH

day of

APRIL A.D.

Desse White

SECRETARY OF STATE