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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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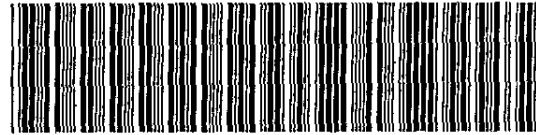
(Business Entity Name)

(Document Number)

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JP

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BARANZELLI - SILK SURPLUS
(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:

GINNY PARKER

(Name of Person)

BARANZELLI - SILK SURPLUS

(Firm/Company)

3630 S. DIXIE HWY

(Address)

WEST PALM BEACH FL 33405

(City/State and Zip code)

For further information concerning this matter, please call:

GINNY PARKER

(Name of Person)

at (561) 832-7055

(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

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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. SILK SURPLUS, 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. NEW YORK 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 6/15/60 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 300 Trade Zone Drive, Ronkonkoma, NY 11779
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 942 Third Avenue, NY NY 10022
(Principal office address)

300 TRADE ZONE DRIVE, RONKONKOMA NY 11779
(Current mailing address)

8. fabrics, fringes and furniture - silks, cottons, Rayons fabric -
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) textile products for home

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: GINNY PARKER

Office Address: 3630 S. DIXIE HWY

WEST PALM BEACH, Florida 33405
(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.

Ginny Parker
(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: E. Ward Bitter II
Address: 942 Third Ave
New York, NY 10022

Vice Chairman: _____
Address: _____

Director: Mark J. Bitter
Address: 300 Trade Zone Dr.
Ronkonkoma, NY 11779

Director: Robert F. Bitter
Address: 37-24 24th STREET
Long Island City, NY 11101

B. OFFICERS


President: E. Ward Bitter, II
Address: 942 Third Ave
New York, NY 10022

Vice President: _____
Address: _____

Secretary: Robert F. Bitter
Address: 37-24 24th STREET, L.I. City, NY 11101

Treasurer: Mark J. Bitter
Address: 300 TRADE ZONE DR., Ronkonkoma, NY 11779

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

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. Edwin Ward Bitter II CEO
(Typed or printed name and capacity of person signing application)

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State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of SILK SURPLUS, INC. was filed on 06/15/1960, fixing the duration as perpetual, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation. I further certify the following:

A Biennial Statement was filed 01/08/1993.

A Biennial Statement was filed 09/03/1993.

A Biennial Statement was filed 06/13/2000.

The Biennial Statement is past due.

I further certify, that no other documents have been filed by such Corporation.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 28th day of January
two thousand and five.*

Secretary of State

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA