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From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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FOREIGN PROFIT/NONPROFIT CORPORATION Brookwood Companies Incorporated

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Help

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.

15612148442

	orporation; must include "INCORPORATED," "	COMPANY," "CORPORATION,"	
"Inc.," "Co.," "C	orp," "Inc." "Co," or "Corp.")		
Brookwood Tex	tiles		
(If name unavail	able in Florida, enter alternate corporate name add	opted for the purpose of transacting business in	n Florida)
Delaware	3		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
February 24, 19	89		
(Date	of incorporation) 5.	(Date of duration, if other than perpetu	al)
185 Madison Av	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502		
485 Madison Avi		P. F.S., to determine penalty liability)	
485 Madison Avi	(SEE SECTIONS 607.1501 & 607.1502 enue, Suite 500, New York, New York, 10022 (Principal office	Street address)	702
485 Madison Av	(SEE SECTIONS 607.1501 & 607.1502 enue, Suite 500, New York, New York, 10022 (Principal office	P. F.S., to determine penalty liability)	Silly 1,007
	(SEE SECTIONS 607.1501 & 607.1502 enue, Suite 500, New York, New York, 10022 (Principal office	street address) address, if different)	21 Sity 1302
	(SEE SECTIONS 607.1501 & 607.1502 enue, Suite 500, New York, New York 10022 (Principal office (Current mailing a	street address) address, if different)	Fid 21 Crit 1802
Name and stree	(SEE SECTIONS 607.1501 & 607.1502 enue, Suite 500, New York, New York 10022 (Principal office (Current mailing and address) of Florida registered agent: (P.O. 1	street address) address, if different)	12 PH 1:
Name and stree	(SEE SECTIONS 607.1501 & 607.1502 enue, Suite 500, New York, New York 10022 (Principal office (Current mailing and address of Florida registered agent: (P.O. 1) Corporate Creations Network Inc. 801 US Highway 1	street address) address, if different)	2

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.

> Carlos M Alvarez, Special Secretary (Registered agent's signature)

10. 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.

A. DIRECTORS Neil Jacobson Celine Jacobson Name: □ Chairman ■Chairman 485 Madison Avenue, Suite 500 485 Madison Avenue, Sulte 500 ☐ Vice Chairman Address: ☐ Vice Chairman New York, New York 10022 New York, New York 10022 ■ Director □Director □President □President □Vice President □Vice President ☐Treasurer □ Secretary ☐ Treasurer □ Secretary □Other _____ □Other _____ ☐Other ______ Other ____ Name: Anthony Gumbiner Frank Montie □Chairman ☐Chairman 485 Madison Avenue, Suite 500 485 Madison Avenue, Suite 501 □Vice Chairman Address: □ Vice Chairman Address: New York, New York 10022 New York, New York 10022 Director Director □President □ President □Vice President □Vice President ☐Treasurer ☐ Secretary ☐ Treasurer □ Secretary □Other _____ Other_____ []Other _____ □Other _____ Mary Ann Ball Name: Gert Lessing □ Chairman □ Chairman 485 Madison Avenue, Suite 500 485 Madison Avenue, Suite 50t ☐ Vice Chairman Address: □Vice Chairman Address: _ New York, New York 10022 New York, New York 10022 □ Director Director □President □ President ☐ Vice President ☐Vice President ____ Secretary Treasurer Secretary □Treasurer □Other _____ □Other _____ Other _____ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he of she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BROOKWOOD COMPANIES INCORPORATED" 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 FIFTH DAY OF AUGUST, A.D.

2021.

Authentication: 203855098

Date: 08-05-21