F95000003815

TRANSMITTAL LETTER

TO: QUALIFICATION/TAX LIEN SECTION DIVISION OF CORPORATIONS

SUBJECT:	MONTBLANC	MANUFACTURING	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:

PATRICK DURIEUX	10~
Mame of Person) MONTBLANC MANUFACTURING INC.	W95-
2601 NW 5 HAVE. #1	
MiAM; FL 33/27	
(City, State and Zip Code)	1

Should you need to call someone concerning this matter, please call:

PATRICK DURIEUX at (305) 576-4930.

(Name of Person) Area Code & Daytime Telephone Number

SEGRETARY OF SAME OF USE OF SEGRETARY OF CORPORATION OF CORPORATIO

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 MAILING ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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. MONTBUANC MANUFACTURING NC. (Name of corporation: must include the word "NCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
(Name of corporation: must include the word "NCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person
2. DELAWARE (State or country under the law of which it is incorporated) 3. APPLIED FOR (FEI number, if applicable)
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. O5/30/95 5. FERPETUAL (Duration: Year corp. will cease to exist or "perpetual")
,
6. UPON QUNCIFICNTION (Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.) い に
6. UPON QUNCIFICATION (Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.) 7. 2601 NW 5th Ave. Stell MIAMI FL 33127 (Current mailing address)
7. 2001 700 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
MIAMI PL 33127
(Current mailing address)
(Current mailing address) 8. MANUFACTURING AND WHOLESAUING OF WOREN CLOTHING (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) 9. Name and street address of Florida registered agent:
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida).
9. Name and street address of Florida registered agent:
_,
Name: TATION DOVERDOX
Name: PATRICK DURIEUX Office Address: 2601 NW 5th Ave. 5th /
MIAMI PL , Florida, 33/27 (Zip Code)
(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.

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.

(Registered agent's signature)

12. Names addre	and addresses of officers and/or directors:(Strees ONLY- P. O. Box NOT acceptable)	oet
A. DIREC	CTORS (Street address only- P. O . Box NOT acceptable	- }
Chairman: _		
Address:		
Vice Chairm	nan:	
Address:		
Director: _		DIVES SE
Address:	ترة دع ا	965 965 965
Director:		<u>, </u>
·		
President: Address:	PATRICK DURIEUX IIII BISCAYNE BUD. A1758 MIAMI FL 33181 Lent: SAME AS ABOVE (PRESIDENT)	<u> </u>
Address:		
Address:	LILIANA RODRIGUEZ 19370 COWINS AUC. C1410 NMIAMI BEACH FL 33160	
Treasurer:	SAME AS ABOVE (SECRETARY)	
Address:	processing you may attach an addendum to the applicati	—
13	ecessary you may attach an addendum to the applicational officers and/or directors.	
	ture of Chairman, Vice Chairman, or any officer listed in numb	er
14. (Typed	or printed name and capacity of person signing application)	_

$State\ of\ Delaware$

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MONTOLANC MANUFACTURING 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-SEVENTH DAY OF JULY, A.D. 1995.

DIVISION OF COSPOSITION OF AUG. 1



Edward J. Freel, Secretary of State

AUTHENTICATION: 87276

DATE?-27-95