# F98000002536

#### TRANSMITTAL LETTER

To: Qualification/Tax Lien Section Division of Corporations	
SUBJECT: BOONE FABRICS, INC	· v · · · · · · · · · · · · · · · · · ·
(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	
Tomes F. Soi	11075
(Name o	Uers 2000024864322 f Person) -04/13/9801063001
Dames t. Spillers   200002480432-2     (Name of Person)	
(Firm/Company)	
P.O. Box 369 (Address)	
(Add	ress)
ColFax, N.C. 27235 (City/State/Zip)	
` ,	wis wish
Should you need to call someone concerning this matter, please call:	
Brenda Monroe at (336) 887-310] (Name of Person) (Area Code & Daytime Telephone Number)	
(Name of Person) (Area Code & Daytime Telephone Number)	
COURIER ADDRESS:	MAILING ADDRESS:
Qualification/Tax Lien Section	Qualification/Tax Lien Section
Division of Corporations	Division of Corporations P.O. Box 6327
409 E. Gaines St. Tallahassee, FL 32399	Tallahassee, FL 32314
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#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 2, 1998

BRENDA MONROE BOONE FABRICS, INC. PO BOX 369 COLFAX, NC 27235

SUBJECT: BOONE FABRICS, INC. Ref. Number: W98000004539

We have received your document for BOONE FABRICS, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$70.00.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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) 487-6092.

Hart Collins Senior Corporate Section Administrator

Letter Number: 398A00011392



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 13, 1998

BRENDA MONROE BOONE FABRICS, INC. PO BOX 369 COLFAX, NC 27235

SUBJECT: BOONE FABRICS, INC. Ref. Number: W98000004539

We have received your document for BOONE FABRICS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

CT Corporation System must sign accepting designation of registered agent in section 10 as opposed to Brenda Monroe.

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) 487-6092.

Hart Collins Senior Corporate Section Administrator

Letter Number: 798A00019599

### 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. INC: DONe Fabrics (Name of corporation; must include the word "INCORPORATED", "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.) 2. North Carolina
(State or country under the law of which it is incorporated)

4. January 1982
(Date of incorporation)

5. Purplication: Year corp. will cease to exist or "perpetual") O1-D1-98(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) (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) Drices INC CT Corp System
12005. Price As land Rd Office Address: 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. BABARA A. BURKE SPECIAL ASSISTANT SECRETARY

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 addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)
A. DIRECTORS (Street address only - P.O. Box NOT acceptable)
Chairman: James F. Spillers
Address: 4400 Trailword Dr.
Greensboro, N.C. 27407
Vice Chairman: William J. Spillers
Address: 426 Rose Meade have
Maples, Fl. 34105
Director: Cynthia I Spillers
Address: 4400 Trailwood Dr
Greensboro NC 2M40M
Director: Brenda K. Monroe
Address: 4738 Fairliew Church Rd.
Trivita N.C. 27310
B. OFFICERS (Street address only - P.O. Box NOT acceptable)
President: James F. Spillers
Address: 4400 Trailword Dr.
Chesnaporo NC 24.407
Vice President: Brenda & Monne
Address: 4738 Fairlieu Cl. Rd.
Trivity NC 27370
Secretary: William J Spillers
Address: 426 Rose Meade Lane
Noples FT. 34105
Treasurer: William J Spillers
Address: 426 Rose Meade Lane,
Naples, F1, 34105
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. <u>Brenda</u> K Monre
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14 Brenda K. Monroe, V.P.

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



## Department of The Secretary of State

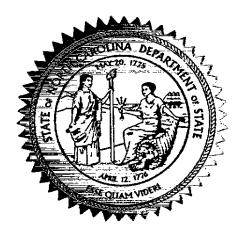
#### CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

BOONE FABRICS, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 29th day of December, 1982, with its period of duration being perpetual.

I FURTHER certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 17th day of March, 1998.

Elaine J. Marshall

Secretary of State