

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: HARBOR WEAR OF FLORIDA, INC.

(Name of corporation - must include suffix)

Dear Sir or Madam:

200002719522--9
-12/22/98--01082--002
*****70.00 *****70.00

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

ROBERT B. HOFFMAN

(Name of Person)

ROBERT B. HOFFMAN, CPA

(Firm/Company)

108 MICHIGAN AVENUE

(Address)

CHARLEVOIX, MI 49720

(City/State/Zip)

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

ROBERT B. HOFFMAN

(Name of Person)

at 616-547-2663

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

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

W98-27912

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 DEC 22 PM 1:38

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

December 14, 1998

ROBERT B. HOFFMAN
ROBERT B. HOFFMAN, CPA
108 MICHIGAN AVE.
CHARLEVOIX, MI 49720

SUBJECT: HARBOR WEAR OF FLORIDA, INC.
Ref. Number: W98000027912

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We have received your document for HARBOR WEAR OF FLORIDA, 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.

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) 487-6095.

Jennifer Sindt
Document Examiner

Letter Number: 698A00058826

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA.

1. HARBOR WEAR OF FLORIDA, INC.
(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. MICHIGAN 3. 38-3440170
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11-23-98 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. DECEMBER 1, 1998
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 108 MICHIGAN AVENUE
CHARLEVOIX, MI 49720
(Current mailing address)

8. RETAIL SALE OF APPAREL
(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)

Name: LISA ROBERTSON

Office Address: 4742 ST. MARC COURT

FERNANDINA BEACH, Florida, 32034
(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.

x Lisa M. Robertson
(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 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: RODERIC J. ROBERTSON

Address: 11459 REYNOLDS STREET
EMPIRE, MI 49638

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only - P. O. Box NOT acceptable)

President: RODERIC ROBERTSON

Address: 11459 REYNOLDS STREET
EMPIRE, MI 49638

Vice President: _____

Address: _____

Secretary: _____

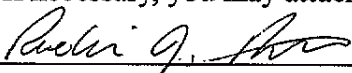
Address: _____

Treasurer: _____

Address: _____

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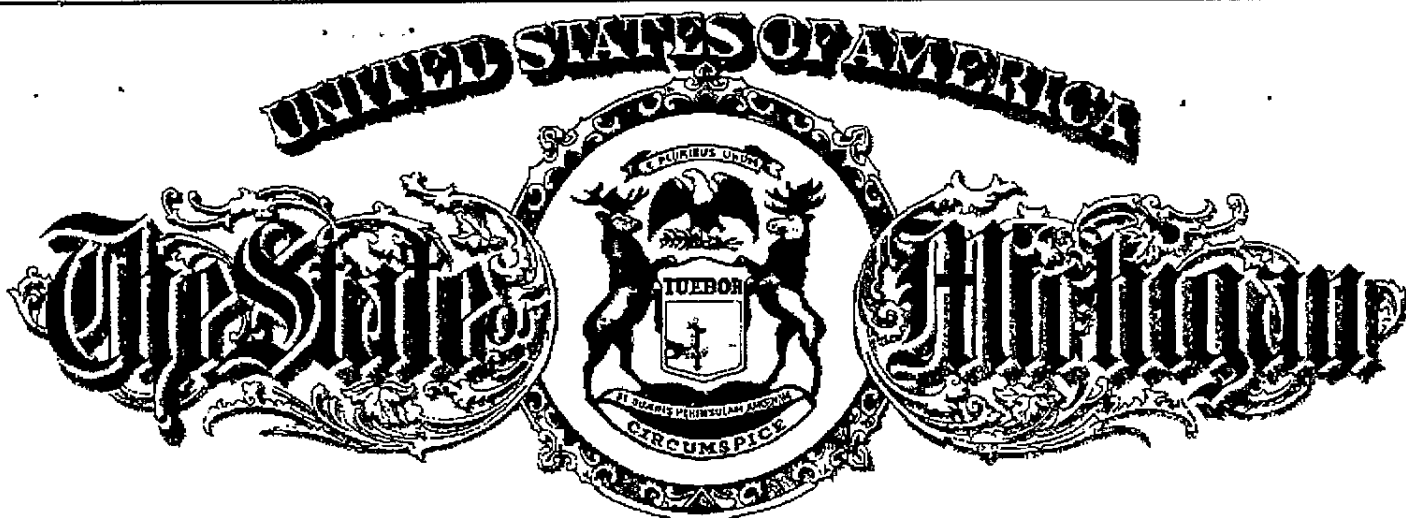
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. RODERIC J. ROBERTSON, PRESIDENT

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



Michigan Department of Consumer and Industry Services

Lansing, Michigan

This is to Certify That

HARBOR WEAR OF FLORIDA, INC.

was validly incorporated on November 23, 1998, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this State.

This certificate is issued to attest to the fact that the corporation is in good standing in this office as of this date and is duly authorized to transact business or conduct affairs in Michigan and for no other purpose. It is in the usual form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 26th day of November, 1998.

Julie Croll

, Director

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Corporation, Securities and Land Development Bureau

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