		<u>-</u>	
To: Qualification/Tax Lien Section	ication/Tax Lien Section		
Division of Corporations			
SUBJECT: GLENOIT CORPORATION	Ŋ		
(Name of corpora	ation - must include suffix)		
Dear Sir or Madam:			
Dom on Wadam.			
The enclosed "Application by Foreign Corporation for	or Authorization to Transact	Business in Florida",	
"Certificate of Existence", and check are submitted to transact business in Florida.	o register the above reference	ed foreign corporation to	
transact ousmess in Profice.		SE SE	
Please return all correspondence concerning this mat	ter to the following:		
	_		
Alan E. Greenfield,		<u> </u>	
(Name	of Person)	EQ & I	
Alan E. Greenfield,	P.A.		
(Firm/C	Company)	- XX - C	
2600 Douglas Road -	Suite #911	<b>&gt;</b>	
	ldress)	<u> </u>	
·	·		
	33134		
(City/S	State/Zip)		
		00027720323 -02/10/9901084007	
Should you need to call someone concerning this mat	ter, please call:	*****87.50 *****87.50	
		-	
Alan E. Greenfield, Esq. at (305	442-1731	<del>=</del> .	
	ea Code & Daytime Telephor	ne Number)	
		•	
STREET ADDRESS:	MAILING ADDRESS:	<del></del>	
Qualification/Tax Lien Section	Qualification/Tax Lien Se	· <del>-</del>	
Division of Corporations	ection		
409 E. Gaines St.	= 1/2/1/95		
Tallahassee, FL 32399	P.O. Box 6327 Tallahassee, FL 32314	= AJ 2/11/95	
Enclosed is a check for the following amount:			
_		· ••	
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & □	3 \$78.75 Filing Fee & 5	\$87.50 Filing Fee,	
Certificate of Status	Certified Copy	Certificate of Status &	
		Certified Copy	

## 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.	G	LENOIT CORPO	RATION	- <del></del> =-	
(Name of conwords or abb	rporation; must include the word reviations of like import in langu n or partnership if not so contain	age as will clearly ind	licate that it is a corpora	ORATION" or tion instead of a	
	are	· 3.	13-3862561	· <u>-</u>	
(State or cour	atry under the law of which it is i	ncorporated)	(FEI number	er, if applicable)	
4. Novemb	er 7, 1995 Date of incorporation)	5. Per	petual		
()	Date of incorporation)	(Duratio	n: Year corp. will cease	e to exist or "perp	etual")
6. Februa	ry 1, 1999			-	
(Date f	irst transacted business in Florida	a.) (SEE SECTIONS 6	607.1501, 607.1502 and	817.155, F.S.)	
7. 4875 N	W 77th Avenue	<u></u>			
N::	DT 001.cc		,	<u>.</u>	
Miami,	_FL_33166 (Cu	rrent mailing address)	**************************************		
` *	ose(s) of corporation authorized in street address of Florida regi		-		ible)
Name:	Alan E. Greenfie	ld	• " : : : : : : : : : : : : : : : : : :		4. •
Office Address	: 2600 Douglas Road	, Suite #911	e e	TALLA	99 FI
	Coral Gables		, Florida, <u>33134</u> (Zip code)	HASSE	
•	d agent's acceptance:			E. FLORI	
in this applicati comply with the	tmed as registered agent and to d ion, I hereby accept the appoint provisions of all statutes relative obligations of my position as reg	nent as registered age ve to the proper and co	nt and agree to act in th	his capacity. I fu	rther agree to
arm moveps are	luc	.h.			- · · · - · · · · · · · · · · · · · · ·
	(Reg	gistered agent's signati	ure)	- · <del></del>	

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.

	TORS (Street address only - P.O. Box	·	=	
Director	- -	110 I acceptable)	. <del>.</del>	
Address: _	399 Park Avenue			
_	New York, New York 10043		<u>=</u>	
Director <b>Vice:Ghain</b>	nan: Thomas J. O'Gorman	=	· · · - <del></del>	
Address: _	III West 40th Street	· -		<u></u>
_	New York, New York 10018		- :-	
Director: _	John M. O'Mara			<u>.</u>
Address: _	399 Park Avenue		<u> </u>	
_	New York, New York 10043		<u> </u>	
Director: _	Joe Silvestri		=	
Address: _	399 Park Avenue			
_	New York, New York 10043			
B. OFFIC	CERS (Street address only - P.O. Bo	x NOT acceptable)	- =	
President: _	Thomas J. O'Gorman		<u> </u>	0 0 71
Address: _	111 West 40th Street	<u> </u>		
	New York, NY 10018		= E C =	
Vice Preside	ent: Lester D. Sears			Ö
Address:	3001 Main Street			<del>-</del>
, r	Tarboro, NC 27886	·	<del>_</del>	
Secretary: _	Lester D. Sears		<u> </u>	
Address:	3001 Main Street		<u>=</u>	
	Farboro, NC 27886			=
Freasurer: _	William R. Crisp	* -· ·		
Address:	3001 Main Street		=	
_	Tarboro, NC 27886	- 4	· · · · · · · · · · · · · · · · · · ·	-
NOTE: If	necessary, you may attach an addendum	to the application listing additional of	fficers and/or directors.	
3. h	6		<del>-</del>	
	(Signature of Chairman, Vice Chair	man, or any officer listed in number	12 of the application)	<u>.</u>
4L	<del> </del>	President/Secretary	<u>-</u>	
	(Typed or printed	name and capacity of person signing	application)	

## State of Delaware

## Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GLENOIT CORPORATION" 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-SIXTH DAY OF JANUARY, A.D. 1999.



PSFEBIO AM 9: 18



Edward J. Freel, Secretary of State

**AUTHENTICATION:** 

2559655 8300

DATE: 9540669

991028051