

**FASHIONS BY CLARA 375**

P.O.BOX 964 • 422 INDUSTRIAL DRIVE • Jamestown, TN 38556 • Phone: (931)879-9712 Fax: (931)879-9724

November 14, 2000

State of Florida  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

600003465126--9  
-11/15/00--01115--002  
\*\*\*\*125.00 \*\*\*\*125.00

RE: FASHIONS BY CLARA

Enclosed are the Application by Foreign Limited Liability Company, the Certificate of Registered Agent and the Original Certificate of Existence from the State of Tennessee for Fashions by Clara, LLC along with our check for \$125.00 for the appropriate filing fees.

We plan to open our store in Naples on November 17, 2000. Your assistance in expediting the processing of this application would be greatly appreciated.

Please send the documents required to obtain the Business License to:

FASHIONS BY CLARA  
P O BOX 964  
JAMESTOWN, TN 38556

FILED  
09 NOV 15 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Sincerely,

*Hollis D. Gammon*  
Hollis D. Gammon

MOO-2375  
OK

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN  
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. FASHIONS BY CLARA LLC  
(Name of foreign limited liability company)
2. TENNESSEE 3. 62-1808220  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. JANUARY 6, 2000 5. PERPETUAL  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. NOVEMBER 17, 2000  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 6050 COLLIER BLVD, SUITE 132  
NAPLES, FL 34114  
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☐

9. The name and usual business addresses of the managing members or managers are as follows:

HOLLIS D. GAMMON  
422 INDUSTRIAL DR  
P O BOX 964  
JAMESTOWN, TN 38556

FILED  
00 NOV 15 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: \_\_\_\_\_

RETAIL SALES LADIES SPORTSWEAR

Hollis D. Gammon  
Signature of a member or an authorized representative of a member.  
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

HOLLIS D. GAMMON

Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,  
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING  
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE  
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

FASHIONS BY CLARA DBA CARIBBEAN TRADERS

2. The name and the Florida street address of the registered agent and office are:

RENEE A. HAMEL

(Name)

6050 COLLIER BLVD, SUITE 132

Florida street address (P.O. Box **NOT** ACCEPTABLE)

NAPLES

FL

34114

City/State/Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..*

*Renee A. Hamel*

(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

FILED  
ON NOV 15 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Secretary of State**  
**Division of Business Services**

**312 Eighth Avenue North**  
**6th Floor, William R. Snodgrass Tower**  
**Nashville, Tennessee 37243**

ISSUANCE DATE: 11/09/2000  
REQUEST NUMBER: 00314553  
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 01/11/2000  
STATUS: ACTIVE  
CORPORATE EXPIRATION DATE: PERPETUAL  
CONTROL NUMBER: 0382853  
JURISDICTION: TENNESSEE

TO:  
FASHIONS BY CLARA  
AT: HOLLIS GAMMON  
PO BOX 964  
JAMESTOWN, TN 38556

REQUESTED BY:  
FASHIONS BY CLARA  
AT: HOLLIS GAMMON  
PO BOX 964  
JAMESTOWN, TN 38556

**CERTIFICATE OF EXISTENCE**

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT  
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"FASHIONS BY CLARA, LLC"  
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A LIMITED LIABILITY COMPANY DULY FORMED UNDER THE LAW OF THIS STATE WITH DATE OF  
FORMATION AND DURATION AS GIVEN ABOVE;  
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE  
EXISTENCE OF THE LIMITED LIABILITY COMPANY HAVE BEEN PAID;  
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND  
THAT ARTICLES OF TERMINATION OF THE EXISTENCE HAVE NOT BEEN FILED.

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FOR: REQUEST FOR CERTIFICATE

ON DATE: 11/09/00

FROM:  
FASHIONS BY CLARA  
PO BOX 964

JAMESTOWN, TN 38556-0000

RECEIVED:	FEES	
	\$20.00	\$0.00
TOTAL PAYMENT RECEIVED:		\$20.00

RECEIPT NUMBER: 00002763672  
ACCOUNT NUMBER: 00352439



*Riley C Darnell*

RILEY C. DARNELL  
SECRETARY OF STATE