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SECRETARY OF STATE
TALLAHASSEE FI OBIN

D. BRUCE

FEB 11 2009

EXAMINER

· COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fashion Towels LLC (Name of Limited Liability Company)	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida	
Please return all correspondence concerning this matter to the following:	
Katherine Lathan (Name of Person)	
t-ashion Towels, LLC (Firm/Company)	
P.O. Box 7126 FEE SEE SEE	11
Columbus, GA 31908 (City/State and Zip Code) (City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Person) at (101e) 51e3 1642 (Name of Person) (Area Code & Daytime Telephone Number)	
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount: \$\sum_\$125.00 \text{ Filing Fee} \sum_\$130.00 \text{ Filing Fee & } \sum_\$\$155.00 \text{ Filing Fee & } \sum_\$\$160.00 \text{ Filing Fee, Certificate} \text{ Ocertificate of Status & Certified Copy} \$\sum_\$ Certified Copy \sum_\$ of Status & Certified Copy \text{ Ocertified Copy} \text{ Ocertified Copy} \$\sum_\$ Certified Copy \text{ Ocertified Copy} \text{ Ocertified Copy} \$\sum_\$ Certified Copy \text{ Ocertified Copy} \$\text{ Ocertified Copy} \$\te	



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 27, 2009

KATHERINE LATHAM P.O. BOX 7126 COLUMBUS, GA 31908

SUBJECT: FASHION TOWELS LLC

Ref. Number: W09000004022

09 FEB 10 AMII: 21
SECRETARY OF STATE
TAIL AMASSEE FINALE

We have received your document for FASHION TOWELS LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, 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.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 509A00002926

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

IN COMPLIANCE WITH SECTION 608.303, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIG. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Tashion Towels LC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(Name of Foreign Elimited Elability Company, must include Elimited Elability Company, E.E.C., of Elec.)
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
2. State of Georgia (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. 10-30-7008 (Date of Organization) 5. Der Det Lual (Duration: Year limited liability company will cease to exist or "perpetual")
6. Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 8401 NW 53 Terrace Suite 114 3 7
Doral FL 33166 Principal Office)
(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:
Katherine Lathan, 4735 Milgen Road, Columbus GA 3190 William Butler, 4735 Milgen Road, Columbus GA 3190
William Butler. 4735 Milgen Road, Columbus GA 3190
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: + extile products
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.)
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.

ď

1. The name o	f the Limited Liability Compa	any is:			
Fashior	Towels, IIC				
If name unavai	lable, the alternate name to be	e used in the state o	f Florida is:		•
2. The name a	nd the Florida street address o	of the registered ago	ent and office a	ıre:	
	Kathleen C	nearhat (Name)			
	840 I M Florida Street Addi	Sycl Terrors (P.O. Box NOTA	CCEPTABLE)	<u>S</u> wit	C114
	Docal	FL City/State/Zip		4	
liability compar agent and agree relating to the p	nmed as registered agent and to ny at the place designated in th e to act in this capacity. I furth proper and complete performa ny position as registered agent	nis certificate, I here her agree to comply nce of my duties, an	by accept the a with the provis d I am familiar	ppointment a ions of all sta with and acc	s registered tutes ept the
	en Beach (Stephure)	_	•	ALLANASSE	09 FEB 10 SECRETARY
	\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Ap Designation of R Certified Copy (Certificate of Sta	Registered Age optional)	.E. FLORIDA	AHII: 21

Control No. 08082600

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

FASHION TOWELS, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 10/30/2008 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 5th day of February, 2009

> Karen C Handel Secretary of State

faun CHandel

Certification Number: 3386089-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp