Division of Corporations

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

18 AUG 19 AM 11:56

Foreign Limited Liability Company INVISTA Ashburn Hill LLC

RECEIVED AUG 19 PM 3: 17 CRETARY OF STATE LAHASSEE, FLORIDA

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D. SRUCE

- AUG 2 0 2013

| CR2E027 (9/10)  | COVER LETTER   |
|---|--|
| TO: Registration S<br>Division of Co                                |  |
| SUBJECT: INVISTA  | A Ashbum Hill LLC  |
|   | Name of Limited Liability Company  |
| The enclosed "Applicate Existence, and check at                     | tion by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of<br>re submitted to register the above referenced foreign limited liability company to transact business in Florida. |
| Please return all corresp   | pondence concerning this matter to the following:  |
| Amy   | Hali   |
| *****   | Name of Person   |
| INVI  | STA S.4 r.l.   |
|   | Firm/Company   |
| 4123  | E. 37th St. N.   |
| <del>-</del>  | Address  |
| Wich  | City/State and Zip Code  City/State and Zip Code  Description  City/State and Zip Code  Description  City/State and Zip Code   |
|   | City/State and Zip Code  |
| amy.h   | inal (@invista.com   |
| <del></del>   | n then explore for an error of traine difficult (chair formation)  |
| For further information   | t concerning this matter, please call:   |
| Amy Hall  | 316 828-1502 RA  |
| <del></del>   | Name of Person Area Code & Daytime Telephone Number  |
| MAILING A Division of Co Registration S P.O. Box 632 Tallahassec, P | orporations Division of Corporations Section Registration Section 7 Clifton Building   |
| Enclosed is a check   | k for the following amount: ling Fee   |

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

IN COMPLIANCE WITH SECTION OR SOLETORIDA STATLINES THE EQUIOWING K SUBJUTTED TO DECKTED A RODERTAL

| 1. INVISTA Ashburn Hill LLC (Name of Foreign Limited Liability Company; must inc   | clude "Limited Liability Company," "L.L.C.," or "LLC.")   |          |
|--|---|----------|
| (If name unavailable, enter alternate name adopted for the purp<br>consent of the managers or managing members adopting the al<br>Company," "L.L.C," "LLC.") | pose of transacting business in Florida and attach a copy of the writt<br>itemate name. The alternate name must include "Limited Liability                  | ten      |
| 2. Delaware  | 20-4184872  |          |
| (Jurisdiction under the law of which foreign limited liability company is organized)   | (FEI number, if applicable)   |          |
| 4. 01/03/2006  | 5. Perpetual  |          |
| (Date of Organization)   | (Duration: Year limited liability company will cease to exist or "perpetual")   |          |
| 6  | ¥ç :  | 2013     |
| (Date first transacted business in )<br>(See sections 608,501 & 608,502 F  |   |          |
| 7. 175 Townpark Dr. NW, Suite 200  |   | AUG I    |
| Kennesaw, GA 30144   | SER   | 9        |
| (Street Addre  | est of Principal Office)  | <b>E</b> |
| 8. If limited liability company is a manager-manage  | 5.5   | <u>-</u> |
| 9. The name and usual business addresses of the ma   | anaging members or managers are as follows:   | ס        |
| INVISTA S.a r.l.   |   |          |
| 175 Townpark Drive NW, Suite 2   | 00, Kennesaw, GA 30144  |          |
|  |   |          |
|  | 90 days old, duly authenticated by the official having custody of record copy is not acceptable. If the certificate is in a foreign language, a submitted.) | rds in   |
| 11. Nature of business or purposes to be conducted   | or promoted in Florida: Safe of flame resistant garments  |          |
| and work wear.   |   |          |
|  |   |          |
| Signature of a member or an a  | authorized representative of a member.  |          |
| •  | xecution of this document constitutes an affirmation under the<br>true. I am aware that any false information submitted in a                                |          |
| document to the Department of State constitution   | ites a third degree felony as provided for in \$.817.155, F.S.)   |          |
| Nancy Kowalski, authorized r   | representative of Invista S.a r.l. (member)   |          |

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:   | 1  |  |
|--|---|--|--|
| INVISTA Ashburn Hi   | 11 LLC  |  | <del></del>  |
| If unavailable, the alternate t  | o be used in the state  | of Florida is:   |  |
| 2. The name and the Florida  | street address of the   | registered agent and office are:   | 2013<br>SATE   |
|  | C T Comor   | ation System   | 유진 중   |
|  |   | ame)   | AUG 19 GEETARY I   |
| 1200 South Pine Island Road  |   | A A  |  |
|  | Florida Street Address (P.  | O. Box NOT ACCEPTABLE)   | AM II: 56 OF STATE E FLORIDI                             |
|  | Plantation  | FL <sup>33324</sup>  | P ( Q)   |
|  | Ci  | ty/State/Zip   | <b>-</b>   |
| liability company at the place<br>agent and agree to act in this<br>relating to the proper and con | designated in this cer<br>capacity. I further ag<br>nplete performance of<br>registered agent as pr<br>em | ept service of process for the above tificate, I hereby accept the appointee to comply with the provisions of my duties, and I am familiar with a ovided for in Chapter 608, Florida | tment as registered<br>of all statutes<br>and accept the |
|  | \$ 100.00 Fili  | ng Fee for Application   |  |
|  |   | ignation of Registered Agent   |  |
|  |   | tified Copy (optional) tificate of Status (optional)   |  |
|  | A SIGN CET  | mirate or present (obsessing)  |  |

# Delaware

PAGE 1

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "INVISTA ASHBURN HILL LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE NINETEENTH DAY OF AUGUST, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

4087281 8300

131001400

DATE: 08-19-13

You may verify this cortificate online at corp.delewers.gov/authvor.shtml