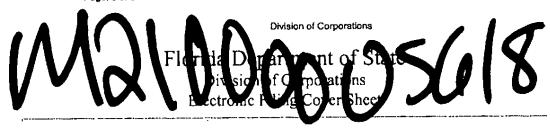
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Foreign Limited Liability Company The Beaufort Bonnet Company, LLC

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Help



From: James Tanks III

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

IN COMPLIANCE WITTI SECTION COSOSOS.	FLORIDA STATUTES	THE FOLLOWING A	S SUBMITTED T	TO REGISTER :	<i>LFOREXGN</i>	LIMITED LIABILITY	,
COMPANYTOTRANSACT BUSINESS IN THE	ESTATE OF FLORIDA:	•					

	npany, I.LC mited Liability Company, must include "Limited I	nability Cempany," "L. L. C.," or "ULG	C "}
me urus silable, enter abemate nam	ne adopted for the purpose of transacting business in Flori	dn. The alternate name must include "Linti	ted Liability Company," "L. L.C," or "L.L.C
entucky		46-0548386	
()urisdiction under the law of which foreign hinded hability company is organized)		3	number, if applicable)
· · · -	(Date first transacted business in Florida, if prior to re (See sections 605 0704 & 605 0705, F.S. to determine	pstration (penalty liability)	
999 PEACHTREE STR	EET N.E., SUITE 688		REET N.E., SUITE 688
et Address of Principal Office)		6. (Mailing Arkless)	
ATLANTA, GA 30309		ATLANTA, GA 30309	
			* :
In and exect address	of Florida registered agent: (P.O. Box	NOT accuptable)	
Name and <u>spect address</u>	th Fielda (tgistered agent. (1.0, box	<u>(101</u> acceptable)	,
Name:	C T Corporation System		
-	1200 South Pine Island Road		
Office Address:	1200 South Pine Island Road		.: *
	Plantation (City)	33324, Florida	
	(Ca)	tZm.co	

Title or Capacity:	Name and Address:	Title or Capacity	<u>:</u>	Name and Address:
□Manager	Name: Oxford Industries, Inc	□Manager	Name:	
■Member	Address: 999 PEACHTREE ST. N.E.	□Member	Address:	
☐ Authorized	SUITE 688	L IAuthorized		
Person	ATLANTA, GA 30309	Person		
□Other	Other	∐Other		□Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
□Other	Other	□ Other		□ Other
				~)
□Manager	Name:	□Manager	Name:	·
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		• , 1
Person		Person		·
Other	□ Other	Other		□Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
- 10. This document is executed in accordance with section 605,0203 (1) (b). Florida Statutes, I am aware that any false information submitted in a document in the Department of State constitutes a third degree fellony as provided for in s.817.155, F.S.

Signisture of an authorized person

Suraj A. Palakshappa, as Vice President & Secretary of Sole Member

Commonwealth of Kentucky Michael G. Adams, Secretary of State

Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Certificate of Existence

Authentication number: 246293

Visit https://web.sos.ky.gov/ftshow/certvalidate.aspx to authenticate this certificate.

I, Michael G. Adams, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

The Beaufort Bonnet Company, LLC

is a limited liability company duly organized and existing under KRS Chapter 14A and KRS Chapter 275, whose date of organization is July 11, 2012 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 6th day of May, 2021 in the 229th year of the Commonwealth



Michael G. Adams
Secretary of State
Commonwealth of Kentucky

246293/0833326