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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : CORPORATION SERVICE COMPANY
Account Number : 120000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1515

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
FISHMAN AND TOBIN, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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COVER LETTER

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: Fishman and Tobin Inc.

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status \$ 8.75

Linda M. Lee, Paralegal, c/o Cozen O'Connor
Name (printed or typed)

200 Four Falls Corporate Center, Suite 400
Address

West Conshohocken, PA 19428
City, State & Zip

610.941.2378
Daytime Telephone Number

lee@cozen.com
E-mail address: (to be used for future annual report notification)

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CERTIFICATE OF DOMESTICATION

The undersigned, Mark Fishman, Chairman/CEO,
(Name) (Title)

of Fishman and Tobin Inc. a foreign corporation,
(Corporation Name)
in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was December 23, 1947.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Pennsylvania.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Fishman and Tobin, Inc.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is TRF Holdings, Inc.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was Pennsylvania.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am Mark Fishman, of Fishman and Tobin Inc.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 21st day of October, 2011.



(Authorized Signature)

Filing Fee:	
Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

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TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

TFR Holdings, Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

600 Wells Road
Orange Park, FL 32073**ARTICLE III PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

To manufacture, sell and deal in boys', children's and infants' clothing of all descriptions.

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS:

3,000 authorized shares par value \$100.00 per share

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Mark Fishman - 600 Wells Road, Orange Park, FL 32073 - Director; Chairman/CEO and Secretary
James Rosenfeld - 600 Wells Road, Orange Park, FL 32073 - Director; President
Nicholas C. Vetere - 600 Wells Road, Orange Park, FL 32073 - Treasurer & CFO**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Mark Fishman
600 Wells Road
Orange Park, FL 32073**ARTICLE VII INCORPORATOR**

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Linda M. Lee, Paralegal, c/o Cozen O'Connor
200 Four Falls Corporate Center, Suite 400
West Conshohocken, PA 19428

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR WITH AND
ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

Signature/Registered Agent_____
Signature/Incorporator_____
Date_____
Date2011 DEC 14 AM 8:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED