

P950000 24135

BASIC ACCOUNTING SERVICES INC.

FILED

95 MAR 24 11 09 45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Requestor's Name
692 W. 29 St. Ste #9

Address
Hialeah Florida 33012

City State Zip
305 887 4185

Phone#

CORPORATION NAME

GREENE TEXTILE CORPORATION

PROFIT CORPORATION NON PROFIT CORPORATION

LIMITED PARTNERSHIP ANNUAL REPORT RESERVATION
 REINSTATEMENT OTHER

CERTIFIED COPY PHOTO COPIES CERTIFICATE
UNDER SEAL

WALK IN WILL WAIT MAIL OUT CALL AFTER 30

Name
Availability

Document
Examiner

Updater

Updater
Verifier

Acknowledgment

W.P. Verifier

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-03/24/95--01094--008
****122.50 ****122.50

NANCY HENDRICKS MAR 28 1995

ARTICLE OF INCORPORATION
OF
GREENE TEXTILE CORPORATION

FILED
95 MAR 24 AM 9 45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: GREENE TEXTILE CORPORATION

The principal place of business of this corporation shall be: 745 W. 25 St. Hialeah, Fl. 33010

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 100 X \$10.00 = \$1,000.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

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

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: GREENE TEXTILE
CORPORATION

2. The name and address of the registered agent and office
is Aurora Naranjo
(Name)

745 W. 25 St.

(P. O. BOX NOT ACCEPTABLE)

Hialeah, Fl. 33010

(CITY/STATE/ZIP)

95 MAR 24 AM 9 45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED 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 MY POSITION AS REGISTERED AGENT.

SIGNATURE

Aurora Naranjo

DATE

03-15-95

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000024135**

1. Corporation Name
GREENE TEXTILE CORPORATION

10000199941--5
-11/08/36--01019--019
****375.00 ****375.00



REINSTATEMENT 9600

Principal Place of Business Mailing Address
745 W. 25TH ST. 745 W. 25TH ST.
HALEAH FL 33010 HALEAH FL 33010

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida	03/24/1995
5. FEI Number	65-0570765
Applied For	
Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PST	NARANJO, AURORA	745 W. 25TH ST.	HALEAH FL 33010

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
NARANJO, AURORA 745 W. 25TH ST. HALEAH FL 33010		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		Suite, Apt. #, Etc.	
		City	State Zip Code
			FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: *[Signature]* REGISTERED AGENT MUST SIGN

Date: 10/31/94

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(f), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

[Handwritten signatures and notes]

CR2E040 (7/96)