P9500024135

BASIC ACCOUNTING SERVICE	S INC.	FILED
Requestor's Name 692 W. 29 St. Ste #9		95 HAR 24 /1 9 45
Address		SECRETARY OF CALA
Hialeah Florida	33012	amiodez. i Ebama
City State 305 887 4185	Zip	
Phone#		
CORPORATION NA	ME	
GREENE TEXTILE CORPORATION	ON	
(X) PROFIT CORPORATION	() NON PROFIT CORPORAT	ION
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cknowledgment	NANCY HENDRICKS	MAR 2 8 1995
P. Verifyer		

ARTICLE OF INCORPORATION

OF

GREENE TEXTILE CORPORATION



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: $745\ \text{W}.\ 25\ \text{St}.\ \text{Hialeah},\ \text{Fl}.\ 33010$

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 State, 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: $100 \times 10.00 = 1,000.00$

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

Aurora Naranjo Director 745 W. 25 St. Hialeah, Fl. 33010

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is (are):

Aurora Naranjo President, Secretary & Treasurer 745 W. 25 St. Hialeah, Fl. 33010 100 Shares

The undersigned has(have) exection this15thday ofMa	uted these Article of Incorpora rch,19_95
	Cura Many Signature/Aitle
	Signature/Title

Signature/Title

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.

he name of ORPORATION					_
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ne name and	address of th	e registered	lagent a	nd office	
	Aurora	Naranjo	- ~ <u>j</u> ec u	N. ≪	95
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		<u></u> -		LEG LEG	
		(Name)		i Tri	-
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	745 W.	(Name) 25 St.	BLE)	i Tri	- Hill 24
	745 W.	(Name)	BLE)	EOLE IVAR O	-

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DEST AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR THER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMACE OF MY DUTIES AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS MY POSITION AS REGISTERED AGENT.

SIGNATURE_	aurana Marayo
DATE	03-15-95

APPLICATION FOR REINSTATEMENT Sandra B, Mortham Secretary of State Division or component was GREENE TEXTILE CORPORATION P95000024135 GREENE TEXTILE CORPORATION Pircoal Place of Business Not at STATE New April S. Note and State and St		PLEASE REAL	ALL INST	ructio	NS BEFORE C	COMPLET	ING THIS FORM.
DOCUMENT # P95000024135 Copposation Marke GREENE TEXTILE CORPORATION Principal Place of Dischars Making Address Making Ad	APF	PLICATION A	, FLORID	A DEPART Sandra B.	MENT OF STATE Mortham	7	
Comparison Name CREENE TEXTILE CORPORATION	REIN	STATEMENT	, y D	•			
Principal Place of Business Pr	1. Corporat	tion Name		35			
## MALEAH FL 32010 ## MAL	GREEN	NE TEXTILE CORPOR	ATION) (OOOO19999415 -11/08/3601019019 ****375.00 ****375.00
2. New Principal Office Address, If Applicable 3. New Malling Office Address, If Applicable 4. Date Incorporated or Qualified To De Business in Floridation De Business and Street Addresses of Each Officer and/or Director (Floridation comprehens must first at least 3 directors) 7. Names and Street Addresses of Each Officer and/or Director (Floridation comprehens must first at least 3 directors) 7. Names and Street Addresses of Each Officer and/or Director (Floridation comprehens must first at least 3 directors) 7. Names and Addresses of Current Registered Agent Street Address of Each Officer and/or Directors 3 (bo Not Tube Pret Office Box Numbers) 8. Name and Address of Current Registered Agent Numbers 1. Name and Address of New Registered Agent. Name And Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) Name And Address of New Registered Agent. Name And Address of New Re	745 W. 25TH ST. 746 W. 25TH ST.						
Suite, Apt. #, etc. Suite, Apt. #, etc.						REIN	NSTATEMENT 96 ac
City & State City & State City & State Country Countr	·				osa, if Applicable	4. Date Incom To Do Bus	porated or Qualified intess in Florida 03/24/1985
2p Country Zp Country CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director's Street Address must list at least 3 develore) Title(s) 2 State Zp City State Zp PST NARANJO, AURORA 745 W. 25TH ST. HALEAH R. 33010 8. Name and Address of Current Registered Agent Page 1 NARANJO, AURORA Name Name				, etc.		65 -	
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Tilots) 2 and/or Directors 3 (Do NOT Use Pest Office Box Numbers) 4 City / State / Zip PST NARANO, AURORA 745 W. 25TH ST. HALEAH R. 33010 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent, Namo NARANO, AURORA 745 W. 25TH ST. HALEAH R. 33010 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent, Namo Sircel Address (P.O. Box Number is Not Acceptable) Suite, Api. #, Etc. City State Zip Code 10. I. being appointer the registered agent of the above named corporation, and tamillar with and accept the obligations of Section 607.0505, F.S. Sonature of Section 607.0505, F.S. Pate of Section 10 Agent Address of New Registered Agent, Namo Date O 3 (Q C	7. Names a		nd/or Director (Fig	orlda nonprofit o			
8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent. Namo Namo Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code FL Consume of Consumer of Consum	1	and/or Directors			Officer and/or Director OT Use Post Office Box I	į	City / State / Zip
NAPANJO, AURORA 745 W. 25TH ST. HALEAH FL 33010 Suite, Api. W. Etc. City State FL City State FL City REGISTERED AGENT MUST SIGN 10. I. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No Namo Namo Street Address (P.O. Box Number is Not Acceptable) Suite, Api. W. Etc. City Date (O/3/25 (See other side for information on Irrangible tax.)	PST	NARANJO, AURORA		745 W. 251	ih st.		HIALEAH FL 33010
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10. It being appointer the registered agant of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. City State Zip Code FL State The registered agant of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Date (O/3/24 Section 607.0505, F.S. Date O/3/24 Section 607.0505, F.S. It is possible to information on intensible tax.) 12. I centify 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 filling		 			Street Address (F	P.O. Box Number	r is Not Accoptable)
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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 filling	11. Do	es this corporation pay pt. of Revenue under S	any intanç 3. 199.032,	jible tax t Florida S	o the Statutes. Yes	□ No [\$	
this reinstalement 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)(i), 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.	this reins owed by	statement application, the reason for di- the corporation have been paid and the	ssolution has beer e names of individ	n climinated, the Juais listed on th	corporate name satisfies his form do not qualify for	the requirements an exemption un	s of section 607.0401 or 617.0401, F.S., that all fees