

Application for Certificate of Authority

FOREIGN Business Corporation

→ Filing Fee: \$310,00 minimum

Pursuant to the provisions of RIGL 7-1.2-1405, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV

The name of the corporation is:					
 					
Carole Fabrics Corporation					
2. It is incorporated under the laws of: Delaware	· · · · · · · · · · · · · · · · · · ·				
Delawali					
3. The name, if different, which it elects to use in Rh	ode Island is:				
(a) If the name of the corporation in its jurisdiction of "incorporated", or "limited," or an abbreviation thereo above corporate endings for use in Rhode Island:	f incorporation does not contain of, then list the name of the corporation	the word "corporation", "company", oration with the addition of one of the			
(b) If the corporate name is not available in Rhode Is corporation will qualify and transact business in Rhofiled with this application:	sland, then set forth below the finded in the "Fictition of the "Fictition of the "Fictition of the	ctitious name under which the ous Business Name Statement" to be			
4. The date of its incorporation is: 9/20/1990					
And the period of its duration is: CHECK ONE BOX	CONLY				
Perpetual (on-going)					
Date certain for dissolution					
5. The address of its principal office is:	·				
1 Blue Hill Plaza, Pearl River, NY 10965					
6. The name and address of the initial registered ag	ent/office in Rhode Island:				
Agent Name Corporate Creations Network Inc.					
Street Address (NOT a P.O. Box) 10 Dorrance Street	et #700				
City/Town Providence	State RHODE ISLAND	Zip Code 02903			

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

FILED

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			ors (optional, i	unless directors	are required under the laws of the	
state or country of which it is incorporated): NAME		-	ADDRESS			
G. Piscatelli	1 Blue Hill Plaza, Pe		a. Pearl Rive			
R. Kass		1 Blue Hill Plaza, Pearl River, NY 10965				
R. Gottuso		1 Blue Hill Plaza, Pearl River, NY 10965				
0 /h					the box to indicate an attachment	
8. (b) The names and of the state or country			cai oπicers (m	andatory if dire	ctors are not required under the law	
OFFICE		NAME		ADDRESS		
PRESIDENT	James F. Andrew		1 Blue	1 Blue Hill Plaza, Pearl River, NY 10965		
VICE PRESIDENT	G. Piscatelli		1 Blue	1 Blue Hill Plaza, Pearl River, NY 10965		
TREASURER	P. Kohlsaat		1 Blue	1 Blue Hill Plaza, Pearl River, NY 10965		
SECRETARY	R. Gottusa	R. Gottusa		1 Blue Hill Plaza, Pearl River, NY 10965		
					k the box to Indicate an attachment	
The aggregate num par value, and series,			ity to Issue; ite	mized by class	es, par value of shares, shares with	
NUMBER OF SHARES	CLAS		SERIES	 ;	PAR VALUE OR STATE NO PAR VALUE	
1000	Common				\$1.00	
						
						
10. An estimate, as a j	percentage, of	he proportion tha	t the estimate	d value of the p	roperty of the corporation to be	
located within this stat the following year, who					the corporation to be owned during	
α	%	v		·		
	//0					
					s to be transacted by the corporation	

Additional Officers/Directors of Carole Fabrics Corporation

Assistant Secretary Jason Van Volkenburgh 1 Blue Hill Plaza Pearl River, NY 10965

12. This application must be accompanied by formation dated within 60 days of the date of t	a <u>Certificate of Good Standing/L</u> his filing.	etter of Status from the state or country of
13. Date when the Certificate of Authority will	be effective: CHECK ONE BOX	ONLY
✓ Date received (Upon filing)		
Later effective date (Date must be no mo	re than 90 days from the date of	filing)
Under penalty of perjury, I declare and affirm t accompanying attachments, and that all states	hat I have examined this Applica ments contained herein are true	tion for Certificate of Authority, including any and correct.
Type or Print Name of Authorized Officer	$\overline{}$	Date
Jason Van Volkenburgh		July 5, 2018
Signature of Authorized Officer of the Corporation	SIGN POYUMENT HERE	



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CAROLE FABRICS CORPORATION" IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE SIXTH DAY OF JULY, A.D. 2018.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CAROLE FABRICS CORPORATION" WAS INCORPORATED ON THE TWENTIETH DAY OF SEPTEMBER,

A.D. 1990.

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

SECRETARY OF STATE CORPORATIONS DIV

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Authentication: 203019951

Date: 07-06-18