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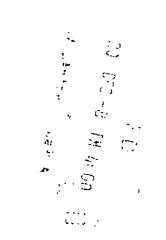
(Requestor's Name)					
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PICK-UP WAIT MAIL					
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(Document Number)					
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## **COVER LETTER**

TO:	Registration Section Division of Corporations
CHDI	ECT: AAA Northeast, Inc.
SUDJ	Name of Corporation – must include suffix
Dear S	ir or Madam:
Affairs	closed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to r the above referenced not for profit corporation to conduct its affairs in Florida.
Please	return all correspondence concerning this matter to the following:
	Tiffany A. Edouard, Senior Paralegal
	Name of Person
	AAA Northeast
	Firm/Company
	<del></del>
	110 Royal Little Drive
	Address
	Providence, RI 02904
	City/State and Zip Code
	tedouard@aaanortheast.com
	E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
Tiffan	y A. Edouard, Senior Paralegal 401 226-7597
<u> </u>	Name of Person Area Code Daytime Telephone Number
	Mailing Address: Street Address:
	Registration Section Registration Section
	Division of Corporations P.O. Box 6327  Division of Corporations The Centre of Tallahassee
	Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303
Enclos	ed is a check for the following amount:
	make check payable to: FLORIDA DEPARTMENT OF STATE
<b>■</b> \$70	.00 Filing Fee \$\Bigcup \\$78.75 Filing Fee & \Bigcup \\$78.75 Filing Fee & \Bigcup \\$87.50 Filing Fee,  Certificate of Status Certified Copy  Certified Copy

## APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  Delaware  3	import in langua in the name at p	ration: must include the word "INCORPOHige as will clearly indicate that it is a corpoiresent. "Company" or "Co." may not be use	RATED" or "CORPORATION" or words or ration instead of a natural person or partners ed as a corporate suffix by a nonprofit cor	ration.)
(State or country under the law of which it is incorporated)  (99/15/2014  (Date of Incorporation)  (Date of Incorporation)  (Date of duration, if other than perpetual)  11/30/2020  (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liab.  110 Royal Little Drive, Providence, R1 02904  (Principal office street address)  (Current mailing address, if different)  Automobile Club  (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  Corporation Service Company  1201 Hays Street  Tallahassee  Florida 32301  (Circ)  (Circ)  (Circ)	(If name unava	ilable in Florida, enter alternate corporate i	name adopted for the purpose of transacting	business in Florida)
(State or country under the law of which it is incorporated)  (99/15/2014  (Date of Incorporation)  (Date of Incorporation)  (Date of duration, if other than perpetual)  11/30/2020  (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liab.  110 Royal Little Drive, Providence, RI 02904  (Principal office street address)  (Current mailing address, if different)  Automobile Club  Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  Corporation Service Company  1201 Hays Street  Tallahassee  Florida 32301  (Civ)  (Zip Code)	Delaware		3, 47-1842331	
(Date of Incorporation)  (Date of Incorporation, if other than perpetual)  (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liab.  (Principal office street address)  (Current mailing address, if different)  Automobile Club  (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  Corporation Service Company  1201 Hays Street  Tallahassee  Florida  (Ciry)  (Zip Code)	(State or cour	try under the law of which it is incorporate	ed) (FEI number, if applicat	ble)
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liable 110 Royal Little Drive, Providence, RI 02904  (Principal office street address)  (Current mailing address, if different)  Automobile Club (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  Corporation Service Company  Tice Address:  Tallahassee , Florida 32301  (Zip Code)	09/15/2014		5	
(Current mailing address, if different)  Automobile Club  (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  Corporation Service Company  Tice Address:  Tallahassee  (City)  (City Code)	(E	Pate of Incorporation)	(Date of duration, if other th	an perpetual)
(Current mailing address, if different)  Automobile Club  (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  Corporation Service Company  Tice Address:  Tallahassee  Tallahassee  Tallahassee  Tice Address:  (Circ)  Tice Address:  Tice Add	11/30/2020			
Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Corporation Service Company  Tice Address: Tallahassee Florida 32301  (City) (Zip Code)		(Principal		
Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Corporation Service Company  Tice Address: 1201 Hays Street  Tallahassee Florida 32301  (City) (Zip Code)	Automobile Cl	ub		
Name: Corporation Service Company  Tice Address: 1201 Hays Street  Tallahassee , Florida 32301  (City) (Zip Code)				;÷
Tallahassee Florida 32301 (Zip Code)	Name:	Corporation Service Company		_ :
Tallahassee Florida 32301 (Zip Code)	fice Address:	1201 Hays Street		· ;
(City) (Zip Code)	·	Tallahassee	. Florida <sup>32301</sup>	
			(Zin Code)	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this apacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Borkley Auditore al, ASST VP

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]: A. DIRECTORS Please see attached Name: \_\_\_\_\_\_ □Chairman ☐ Chairman Name: Address: \_\_\_\_\_ □ Vice Chairman □ Vice Chairman Address: Director | □Director □President □ President □Vice President ☐ Vice President Treasurer □ Secretary Treasurer ■ Secretary Other: □Other:\_\_\_\_\_ Other:\_\_\_\_\_ ☐Other: Name: \_\_\_\_\_\_ □ Chairman □Chairman Name: \_\_\_\_\_ ☐ Vice Chairman Address: ☐ Vice Chairman Address: \_\_\_\_\_ □Director □ Director □President □ President □Vice President ☐ Vice President □ Secretary ☐Treasurer □ Secretary □Treasurer □Other:\_\_\_\_\_ □ Other:\_\_\_\_\_\_ □Other: \_\_\_\_\_ Name: \_\_\_\_ Name: \_\_\_\_\_\_ □ Chairman □ Chairman Address: ☐ Vice Chairman □Vice Chairman Address: \_\_\_\_\_\_\_ □ Director □Director □President □President □ Vice President ☐ Vice President □ Treasurer □ Secretary □ Treasurer □ Secretary Other: Other: Other:\_\_\_ Other: NOTE: 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.

John R. Galvin

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

## **AAA Northeast Officers and Directors**

Directors		Officers	
Frederick K. Butler, Chairman	Arthur J. DeBlois, III	President and CEO:	John R. Galvin
Irwing E. Rogers, III, Vice Chair	Alan R. Leist III	Executive Vice President:	R. Stephen Manty
Mary A. Baughman	William A. Mekrut	Treasurer.	Robert Walters
Eileen O'Boyle Bitetto	Charles Shotmeyer	Secretary:	Marta Genovese
Heather Campion	Mitchell Pally	Assistant Secretary:	Anna R. Whalen
J. Michael Costello		•	
Dennis J. Crossley	<u> </u>		<u> </u>

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

DELAWARE, DO HEREBY CERTIFY "AAA NORTHEAST" 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 FIRST DAY OF DECEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.



Authentication: 204200932

Date: 12-01-20