

D21000000015

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

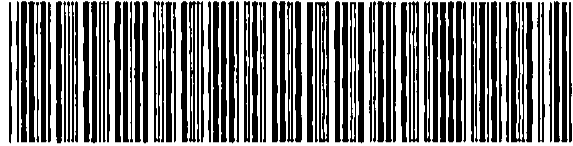
(Business Entity Name)

(Document Number)

ied Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2021 MAR 19 PM 12:53

**Sunshine State Corporate Compliance Company**

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

TE 03/19/2021

**\*\*WALK IN\*\***

TITY NAME SIXT TILTING TRUST

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

XXX

*Plain Copy*

**\*\*WALK IN\*\***

*Certified Copy*

*Certificate of Status*

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

*Certified Copy of Arts & Amendments*

*Certificate of Good Standing*

**\*\*WALK IN\*\***

**\*\*APOSTILLE' / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED \$350.00

ACCOUNT #: I20160000072

*Please call Tina at the above number for any issues or concerns. Thank you so much!*

**AFFIDAVIT TO THE FLORIDA SECRETARY OF STATE  
TO FILE OR QUALIFY**

SIXT TITLING TRUST

A Delaware Statutory TRUST

2021 MAR 19 PM 12:53

In accordance with Section 609.02 of the Florida Statutes, pertaining to Common Law Declarations of Trust, the undersigned, the Chairman of the Board of Trustees of SIXT TITLING TRUST, a

(Name of Trust)

Delaware Trust hereby affirms in order to file or qualify

(State)

SIXT TITLING TRUST, in the State of Florida.

(Name of Trust)

1. Two or more persons are named in the Trust.
2. The principal address is 1501 NW 49th St., Fort Lauderdale, FL 33309
3. The registered agent and street address in the State of Florida is:  
Corporate Creations Network Inc.  
801 US Highway 1, North Palm Beach, FL 33408
4. Acceptance by the registered agent: Having been named as registered agent to accept service of process for the above named Declaration of Trust at the place designated in this affidavit, I hereby accept the appointment as registered agent and agree to act in this capacity.

See attached

(Signature of Registered Agent)

5. I certify that the attached is a true and correct copy of the Declaration of Trust under which the association proposes to conduct its business in Florida.

/s/ Thomas Kennedy

Name: Thomas Kennedy  
Chairman of the Board of Trustees

NOTARY

**Filing Fee:        \$350.00**  
**Certified Copy:   \$ 8.75 (optional)**

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/OFFICE

CORPORATION:

SIXT TITLING TRUST

REGISTERED AGENT/OFFICE:

Corporate Creations Network Inc.

301 US Highway 1

North Palm Beach

FL 33408

I agree to act as registered agent to accept service of process for the corporation named above at the place designated in this Certificate. I agree to comply with the provisions of all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.

/s/ Caitlin Lazarus

\_\_\_\_\_  
CORPORATE CREATIONS NETWORK INC.

Caitlin Lazarus, Special Secretary

Date: 3/18/2021.

Corporate Creations International

301 US Highway 1

North Palm Beach FL 33408

(561) 694-8107

# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED ARE TRUE AND CORRECT COPIES OF ALL DOCUMENTS ON FILE OF "SIXT TITLING TRUST" AS RECEIVED AND FILED IN THIS OFFICE.

THE FOLLOWING DOCUMENTS HAVE BEEN CERTIFIED:

CERTIFICATE OF STATUTORY TRUST REGISTRATION, FILED THE TWENTY-THIRD DAY OF OCTOBER, A.D. 2020, AT 4:49 O`CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE AFORESAID STATUTORY TRUST, "SIXT TITLING TRUST".



  
Jeffrey W. Bullock, Secretary of State

3965425 8100H  
SR# 20210963973

Authentication: 202769104  
Date: 03-18-21

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

## CERTIFICATE OF TRUST OF SIXT TITLING TRUST

This Certificate of Trust of Sixt Titling Trust (the "Trust") is being duly executed and filed on behalf of the Trust by the undersigned, as trustee, to form a statutory trust under the Delaware Statutory Trust Act (12 Del. C. Section 3801 *et seq.*) (the "Act").

1. Name. The name of the statutory trust formed hereby is Sixt Titling Trust.
2. Delaware Trustee. The name and address of the trustee of the Trust with a principal place of business in the State of Delaware are Wells Fargo Delaware Trust Company, National Association, 919 North Market Street, Suite 1600, Wilmington, DE 19801.
3. Series. Pursuant to Section 3806(b)(2) of the Act, the Trust may issue one or more series of beneficial interests having the rights and preferences set forth in the governing instrument of the Trust, as the same may be amended from time to time (each a "Series").
4. Notice of Limitation of Liabilities of each Series. Pursuant to Section 3804(a) of the Act, there shall be a limitation on liabilities of each Series such that (a) the debts, liabilities, obligations and expenses incurred, contracted for or otherwise existing with respect to a particular Series shall be enforceable against the assets of such Series only, and not against the assets of the Trust generally or the assets of any other Series thereof and (b) none of the debts, liabilities, obligations and expenses incurred, contracted for or otherwise existing with respect to the Trust generally or any other Series thereof shall be enforceable against the assets of such Series.
5. Effective Date. This Certificate of Trust shall be effective upon filing.

FILED  
OCT 23 2020  
10 19 PM 12:53

IN WITNESS WHEREOF, the undersigned has duly executed this Certificate of Trust in accordance with Section 3811(a)(1) of the Act.

WELLS FARGO DELAWARE TRUST  
COMPANY, NATIONAL ASSOCIATION,  
not in its individual capacity but solely as Titling  
Trustee

By: Molly Ann Breffitt  
Name: Molly Ann Breffitt  
Title: Assistant Vice President