F00000001306



ACCOUNT NO. :

072100000032

REFERENCE

616803

4349059

AUTHORIZATION :

COST LIMIT :

ORDER DATE: March 8, 2000

ORDER TIME :

9:57 AM

ORDER NO. : 616803-005

CUSTOMER NO:

4349059

CUSTOMER:

Kim Desousa, Legal Assistant

Textron Financial Corporation

40 Westminster Street

11th Floor

Providence, RI

600003165256-<u>-</u> -03/10/00--01069--006 *****70.00 *****70.00

FOREIGN FILINGS

NAME:

SYSTRAN FINANCIAL SERVIC

CORPORATION

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSÖN: Tamara Odom

7(3/10/a

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. Systran Financial Services Corporation (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) (FEI number, if applicable) (State or country under the law of which it is incorporated) March 5, 1984 _ 5. <u>Perpetual</u> (Duration: Year corp. will cease to existor "perpetual") (Date of incorporation) Upon qualification (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 40 Westminster Street Providence, Rhode Island 02940 (Current mailing address) To engage in the business of providing a full range of financial management and data (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) processing related services to the transportation industry. 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Corporation Service Company Name: Office Address: 1201 Hays Street Tallahassee 10. Registered agent's acceptance: 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 capacity. 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. Registered agent's signature) 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

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

which it is incorporated.

See attached

	Street address only - P.O. Box NOT acceptable)	92.02
Director	Stephen A. Giliotti	
Address:	40 Westminster Street	
1001033.	Providence, RI 02940	6 800
Director:	Buell J. Carter, Jr.	- 3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3
Address:	and the same	3
	Providence, RI 02940	· =
Director:	Elizabeth C. Perkins	
Address:	to Tr. I traken Stroot	
	Providence, RI 02940	7
Chairman Dizextor:	Ronald W. Oake	
	4949 SW Meadows Rd., Suite 650	
	Lake Oswego, OR 97035	= =
B. OFFICERS	(Street address only - P.O. Box NOT acceptable)	
President:	David Retallick	.e
Address:	4949 SW Meadows Road, Suite 650	
	Lake Oswego, OR 97035	Square de :
Vice President: _	— Darrel E. Wild	
	6120 Earle Brown Drive, Suite 700	
	Brooklyn Center, MN 55430	=
Secretary:	Linda S. Merican	
Address:	4949 SW Meadows, Suite 650	
	Lake Oswego, OR 97035	
VP-Tax T ransum r:	Kathleen A. Smith	
Address:	40 Westminster Street	
	Providence, RI 02940	, ==
NOTE: If nece	essary, you may attach an addendum to the application listing additional officers and/or directors.	
13.	$A \cdot A = A \cap A$	
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
14. Elizab	(Typed or printed name and capacity of person signing application)	· · · · · · · · · · · · · · · · · · ·

Directors, Officers Report

Systran Financial Services Corporation

DIRECTORS

Buell J. Carter, Jr.

Director

Primary Address:

40 Westminster Street

Providence, RI 02903

Stephen A. Giliotti

Director

Primary Address:

40 Westminster Street

Providence, RI 02903

Elizabeth C. Perkins

Director

Primary Address:

40 Westminster Street

Providence, RI 02903

OFFICERS

Ronald W. Oake

Chairman

Primary Address:

4949 SW Meadows Rd., Suite 650

Lake Oswego, OR 97035

David Retallick

President

Primary Address:

4949 SW Meadows Road, Suite 650

Lake Oswego, OR 97035

Kathleen A. Smith

Vice President - Tax

Primary Address:

40 Westminster Street Providence, RI 02903

Darrel E. Wild

Vice President

Primary Address:

6120 Earle Brown Drive, Suite 700

Brooklyn Center, MN 55430

Linda S. Merican Primary Address:

Secretary 4949 SW Meadows Road, Suite 650

Lake Oswego, OR 97035

Assistant Secretary

Jonathan Cohen Primary Address:

4949 SW Meadows Road, Suite 650

Lake Oswego, OR 97035

Elizabeth C. Perkins

Assistant Secretary

Primary Address:

40 Westminster Street

Providence, RI 02903

March 07, 2000

CERTIFICATE

State of Oregon

OFFICE OF THE SECRETARY OF STATE

Corporation Division

DHA TO MIL'38

I, BILL BRADBURY, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

SYSTRAN FINANCIAL SERVICES CORPORATION

was

incorporated under the Oregon

Business Corporation Act

on

March 5, 1984

and is active on the records of the Corporation Division as of the date of this certificate.



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

BILL BRADBURY, Secretary of State

By

Sally L. Poole