



FOI 000000 227

ACCOUNT NO. : 072100000032

REFERENCE : 960807 5051651

AUTHORIZATION :

Patricia Pizento

COST LIMIT : \$ 70.00

ORDER DATE : January 10, 2001

ORDER TIME : 3:12 PM

ORDER NO. : 960807-010

CUSTOMER NO: 5051651

400003536754--5

CUSTOMER: Mr. Anthony Varrone
Greenberg Traurig, P.a.
111 North Orange Avenue
Suite 2050
Orlando, FL 32801

FOREIGN FILINGS

NAME: RENT RITE FRANCHISING INC.

XXXX QUALIFICATION (TYPE: CO)

(Handwritten signature/initials)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson -- EXT# 1155

EXAMINER: _____

RECEIVED
01 JAN 12 PM 4:36 01
DIVISION OF CORPORATIONS
TALAHASSEE, FLORIDA
FILED
JAN 12 AM 8:56
SECRETARY OF STATE

Handwritten: 1/12

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION
TO TRANSACT BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. RENT RITE FRANCHISING, INC.
(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.)
2. TENNESSEE
(State or country under the law of which it is incorporated)
3. 58-2589780
(FEI number, if applicable)
4. 12/22/00
(Date of incorporation)
5. PERPETUAL
(Duration: Year corp. will cease to exist or "perpetual")
6. THE DATE SHALL BE WHEN THE CORPORATION RECEIVES THE CERTIFICATE OF AUTHORITY
FROM THE FLORIDA DEPARTMENT OF STATE
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.1503.)
7. 7601 N. FEDERAL HIGHWAY, SUITE 260B, BOCA RATON, FL 33487

(Current mailing address)
8. TO ENGAGE IN ANY LAWFUL ACTIVITY OF THE STATE
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: CT CORPORATION SYSTEM

Office Address: 1200 S. PINE ISLAND RD.

PLANTATION, FL, Florida 33324
(Zip code)

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SECRETARY OF STATE
ALBANY, FLORIDA

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.

By: Barbara A Burke
(Registered agent's signature)

BARBARA A. BURKE
SPECIAL ASSISTANT SECRETARY

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

A. DIRECTORS (Street address only - P.O. Box **NOT** acceptable)

Chairman: KARL A. SCHLEDWITZ

Address: 5668 SOUTH REX ROAD, SUITE 200, MEMPHIS, TENNESSEE 38119

Vice Chairman: _____

Address: _____

Director: EDWARD J. STANKO

Address: 7601 N. FEDERAL HIGHWAY, SUITE 260B, BOCA RATON, FL 33487

Director: _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. OFFICERS (Street address only - P.O. Box **NOT** acceptable)

President: EDWARD J. STANKO

Address: 7601 N. FEDERAL HIGHWAY, SUITE 260B, BOCA RATON, FL 33487

Vice President: _____

Address: _____

Secretary: KARL A. SCHLEDWITZ

Address: 5668 SOUTH REX ROAD, SUITE 200, MEMPHIS, TENNESSEE 38119

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

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

14. KARL A. SCHLEDWITZ, Chairman

(Typed or printed name and capacity of person signing application)

Secretary of State
Division of Business Services
312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, Tennessee 37243

ISSUANCE DATE: 01/11/2001
REQUEST NUMBER: 01011509
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 12/27/2000
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: PERPETUAL
CONTROL NUMBER: 0400694
JURISDICTION: TENNESSEE

TO:
CFS
8161 HWY 100
NASHVILLE, TN 37221

REQUESTED BY:
CFS
8161 HWY 100
NASHVILLE, TN 37221

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT
"RENT RITE FRANCHISING, INC."

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF
INCORPORATION AND DURATION AS GIVEN ABOVE;
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE
EXISTENCE OF THE CORPORATION HAVE BEEN PAID;
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

FILED
01 JAN 12 AM 8:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOR: REQUEST FOR CERTIFICATE

ON DATE: 01/11/01

FROM:
CFS
8161 HIGHWAY 100
#172
NASHVILLE, TN 37221-0000

RECEIVED: FEES \$180.00 \$0.00
TOTAL PAYMENT RECEIVED: \$180.00

RECEIPT NUMBER: 00002784113
ACCOUNT NUMBER: 00101230



Riley C Darnell

RILEY C. DARNELL
SECRETARY OF STATE