

CT CORPORATION SYSTEM

F01000002549

FILED
MAY 11 PM 1:30
SECRETARY OF STATE
TALLAHASSEE FLORIDA

CORPORATION(S) NAME

S.D. Lyons, Inc.

0

000004212140--0
-05/11/01--01095--003
*****8.75 *****8.75

000004212140--0
-05/11/01--01095--002
*****70.00 *****70.00

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<input type="checkbox"/> Nonprofit	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
<input checked="" type="checkbox"/> Foreign	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input type="checkbox"/> Change of RA
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30
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<input type="checkbox"/> Mail Out		

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

5/11/01

Order#: 4331854

Ref#: _____

Amount: \$ _____

W.P. Verifier

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

9

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. S.D. Lyons, 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. Rhode Island

(State or country under the law of which it is incorporated)

3. 05-0452899

(FEI number, if applicable)

4. April 30, 1990

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. upon qualification

(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 18 Christine Drive, Barrington, Rhode Island 02806

1960 Fall River Avenue, Seekonk, Massachusetts 02771

(Current mailing address)

To engage in the business of analysis of automotive fraud, fires and mechanical failure, and all things incidental thereto, and any other business permitted by FL law

8.

(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida, 33324 (Zip code)

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.

C T Corporation System

Lauren Kreatz (Registered agent's signature) LAUREN H. KREATZ, 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)

FILED 01 NOV 11 PM 1:30 TALLAHASSEE, FLORIDA SECRETARY OF STATE

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Not applicable. S. D. Lyons, Inc. is a close corporation pursuant to 7-1.1-51 of R.I. General Laws, 1956, as amended

Address:

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

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SECRETARY OF STATE

B. OFFICERS

President: S. Dennis Lyons

Address: 18 Christine Drive, Barrington, RI 02806

Vice President: S. Dennis Lyons

Address: (same as above)

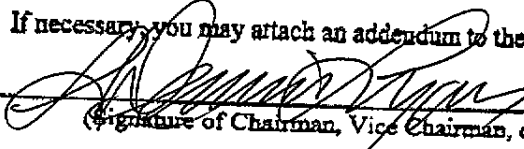
Secretary: S. Dennis Lyons

Address: (same as above)

Treasurer: S. Dennis Lyons

Address: (same as above)

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. S. Dennis Lyons
(Typed or printed name and capacity of person signing application)



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State

The Office of the Secretary of the State of Rhode Island and Providence Plantations, HEREBY CERTIFIES, that

S. D. Lyons, Inc.

a Rhode Island corporation, filed original articles of incorporation in this office on the thirtieth day of April A.D., 1990; and

IT IS FURTHER CERTIFIED that said corporation is now of record and in good standing in this office.

FILED
01 MAY 11 PM 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SIGNED AND SEALED this seventh day
of May A.D., 2001.

Edward S. Inman, III

Secretary of State

BY *Andrea M. Foxcise*

