## CT FOR A SOUDOU 2765

CORPORATION(S) NAME		SECAL MA	FILED III. 27
New Haven Moving Equipmen	t Corp. of Illinois	25. E. C.	
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660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615 BK

APPLICATION BY FOREIGN CORPORAT	ION FOR AUTHORIZATION TO TRANSACT			
BUSINESS	IN FLORIDA			
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA S REGISTER A FOREIGN CORPORATION TO TRANSACT				
1. New Haven Moving Equipment Corp • of Illi (Name of corporation; must include the word "INCORPORAT words or abbreviations of like import in language as will clearl natural person or partnership if not so contained in the name at	ED", "COMPANY", "CORPORATION" or y indicate that it is a corporation instead of a			
	36-3278563			
(State or country under the law of which it is incorporated)	(FEI number, if applicable)			
4. <u>12/15/83</u> 5.	Perpetual			
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")			
6. March 15, 2000				
(Date first transacted business in Florida. If corporation has not (SEE SECTIONS 607.1501	transacted business in Florida, insert "upon qualification."), 607.1502 and 817.155, F.S.)			
7. 1110 Fullerton Ave. Addison, IL 60101				
(Principal office add	ress)			
1963 West McNab Rd. Pompano Beach, FL	33069			
(Current mailing add	ress)			
8. <u>Moving Equipment Rental and Sales</u>				
(Purpose(s) of corporation authorized in home state or co	untry 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 Systems				
Office Address: 1200 South Pine Island Rd.				
Plantation,	, Florida 33324			
(City)	(Zip code)			
·	(—r,			
10. Registered agent's acceptance:				
Having been named as registered agent and to accept servi designated in this application, I hereby accept the appointn further agree to comply with the provisions of all statutes reductions, and I am familiar with and accept the obligations of	nent as registered agent and agree to act in this capacity. elative to the proper and complete performance of my			
<u>Néle Basi</u>	gnature) Nicola Rubia, Asst. Vice President			
(Registered agent's sig	gnature) # 11000 (NOO) 1 17837. VICE 11201000.			

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 business addresses of officers and/or directors:

A. DIRECT	ORS	9		
Director:	James P. Levine	一色色金红		
Address:	42 Dukes Cr.	E S M		
	Lincolnshire, IL 60069	SET OF IN		
Director: Vice Chairman	Lawrence M. Levine	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Address:	638 N. Cherokee Ave.			
	Los Angeles, CA 90004			
Director:	Roger A. Levine			
Address:	41 Washington St.	. •		
	East Haven, CT 06512			
Director:	en e			
Address:				
B. OFFICE	<b>RS</b> · · · · · · · · · · · · · · · · · ·	·		
President: Ja	mes P. Levine			
Address: 42	Dukes Cr.			
<u>Li</u>	ncolnshire, IL 60069			
Vice President:	Lawrence M. Levine			
	8 N. Cherokee Ave.			
Lo	s Angeles, CA 90004			
Secretary: _RC	ger A. Levine			
Address: 41	Washington St. East Haven, CT 06512			
Treasurer: Ro	ger A. Levine			
Address: 41	Washington St. East Haven, CT 06512	- · · · · · · · · · · · · · · · · · · ·		
NOTE: If nec	ressary, you may attach an addendum to the application listing additional off (Signature of Chairman, Vice Chairman, or any officer listed in number 12			
D-		от те аррисацоп)		
14. Roger A. Levine  (Typed or printed name and capacity of person signing application)				



## To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

NEW HAVEN MOVING EQUIPMENT CORP. OF ILLINOIS, 

> In Testimony Whereof hereto set my hand and cause to be affixed the Great Seal of



day of  $\underline{\qquad}$  MAY A.D.  $\underline{\qquad}$  2001 .