# -010000003780

TO: Registration Section Division of Corporations			
SUBJECT: FLITE ACRO SER (Name of corporation	VICE, INC.		
(Name of corporation	on - must include suffix)		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to transact business in Florida.	Authorization to Transact Buregister the above referenced f	siness in Florida", Foreign corporation	
Please return all correspondence concerning this matte	er to the following:		
			, · · · · · · · · · · · · · · · · · · ·
(Name o	f Person)		-
ILITE Aust	DERVICE, INC.		· · · · · · · · · · · · · · · · · · ·
(Firm/Co	O SERVICE, INC.		
Do Rox 5	104		
P.O DOX 9	iress)		
Dras of Alas	e and Zip code)		. • <b></b> 1, 2222.21
(City/State	e and Zip code)		
	400	00044778: -07/16/01011	34006 )?006
For further information concerning this matter, please	e call:	*****78.75 *	****78.75
SIN F RASTIAN at (801 (Name of Person) (Area	_	<u>725-207/</u> Number)	
			2
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section Division of Corporations	SEUAE	
Division of Corporations 409 E. Gaines St.	P.O. Box 6327	ASS	- house - morale - 5
Tallahassee, FL 32399	Tallahassee, FL 32314	<u>1</u> 21 → (	4
Enclosed is a check for the following amount:		EF STA	, <b>O</b>
☐ \$70.00 Filing Fee	S78.75 Filing Fee & Certified Copy	Sertificate of Status Certified Copy	; &

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

(FEI number, if applicable) (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 7. 45 No. 400E. LINDON, W. 8404Z

(Principal office address)

P.O. Tox 404 PLEASANT GROVE, W. 8406Z

(Current mailing address) PROVIDE A 3 MONTH /3K MILE LIMITED WARRANTY FOR USED CARS (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: GEOPHE DANIELS

Office Address: 8885 TANGLEWOOD PLASIG

TEMPLE TERROLE , Florida 33617
(City) (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.

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. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: SAP BASTIAN
Address: 45 No. 400E
LINDON, W 84042
Vice President:
Address:
Secretary: LESLIE T. BASTIAN
Address: 45 No. 400F LINDON, wt 84042
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)
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SID BASTIAN 45 N 400 E LINDON, UT 84042

## **Utah Department of Commerce** Division of Corporations & Commercial Code

160 East 300 South, 2nd Floor, Box 146705 Salt Lake City, UT 84114-6705 Service Center: (801) 530-4849 Toll Free: (877) 526-3994 Utah Residents Fax: (801) 530-6438 Web site: http://www.commerce.state.ut.us

July 2, 2001

# CERTIFICATE OF EXISTENCE

Registration Number:

4760908-0142

**Business Name:** 

ELITE AUTO SERVICE, INC.

Registered Date:

05-17-2000

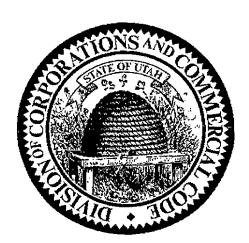
**Entity Type:** 

CORPORATION - DOMESTIC - PROFIT

**Current Status:** 

ACTIVE

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah.



Kathy Berg Kathy Berg

Director

Division of Corporations and Commercial Code