

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

ARI CORPORATION
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

JIM REYNOLDS

(Name of Person)

000004470960--8

07/12/01 01030-007

*****70.00 *****70.00

DBA: FEL of FLORIDA

(Firm/Company)

16510 S.E. 27th PL. Rd.

(Address)

W01-16211

OCKLAHAWA, FL. 32179

(City/State and Zip code)

For further information concerning this matter, please call:

JIM REYNOLDS

(Name of Person)

at (352) 625-1100

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JUL 24 AM 10:16

FILED

WJ
7/24

3893



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

July 13, 2001

JIM REYNOLDS
ARI CORPORATION
16510 S.E. 27TH PL. RD.
OCKLAWAHA, FL 32179

SUBJECT: ARI CORPORATION
Ref. Number: W01000016211

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

We have received your document for ARI CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please note that you cannot form a new name by adding "FLORIDA" or "OF FLORIDA" to your corporate name. You may wish to call the number below to check the availability of any name you wish to adopt.

Your cover letter refers to a name "F&L of Florida." This name is also unavailable as a corporate name, so please do not try to adopt it with this form. However, if you would like to operate under that name in Florida you can file a Fictitious Name and do so. Even if you do that, you must still adopt a different name with this resolution form. We are sending you a Fictitious Name form separately.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 001A00041490

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SECRETARY OF STATE
TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned CHARLES E. BRACKIN, do hereby certify
(Name)

that this Resolution of the Board of Directors of ARI CORPORATION

(Corporate Name)

a corporation duly organized and existing under the laws of the State of INDIANA,

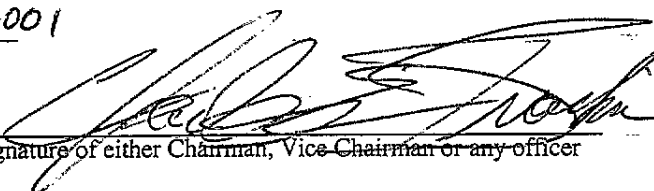
was duly adopted on JULY 23, 2001.

Be it resolved, that ARI CORPORATION,
(Corporate Name)

organized and existing in the State of INDIANA, hereby adopts the name

ARI CORPORATION OF INDIANA for use in Florida.

Dated: JULY 23, 2001


Signature of either Chairman, Vice Chairman or any officer

CHARLES E. BRACKIN
Type or print name

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TALLAHASSEE, FLORIDA

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**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. ARI 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.)
2. INDIANA 3. 35-2110553
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. MAY 4, 2000 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION
(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. 10704 N.E. Hwy 314 SILVER SPRINGS FL. 34488
(Principal office address)
- SAME
(Current mailing address)
8. BUY & SELL USED AUTOMOBILES
(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: JAMES REYNOLDS
- Office Address: 16510 SE 27th PL. Rd.
OKLAHAWA HA, Florida 32179
(City) (Zip code)

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STATE OF FLORIDA
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.

James N. Reynolds
(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 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:

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

B. OFFICERS

President:

Address:

Vice President:

Address:

Secretary:

Address:

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.

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

STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
CERTIFICATE OF EXISTENCE

FILED
01 JUL 24 AM 10:17
SECRETARY OF STATE
TALLAHASSEE FLORIDA

To Whom These Presents Come, Greeting:

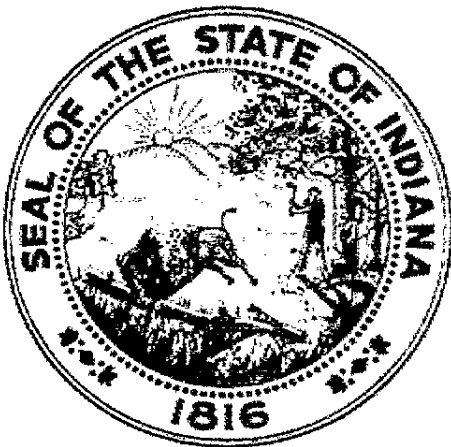
I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper office to execute this certificate.

I further certify that records of this office disclose that

ARI CORP.

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on May 4, 2000, and was in existence or authorized to transact business in the State of Indiana on July 9, 2001.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand
and affixed the seal of the State of Indiana, at the
City of Indianapolis, this Ninth day of July, 2001.

Sue Anne Gilroy

SUE ANNE GILROY, Secretary of State

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