# FOI 550055572

#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	0000046417309							
SUBJECT: NAC, INC.	-10/18/0101051012 *****87.50 *****87.50							
	(Name of corporation - must include suffix)							
Dear Sir or Madam:	wo1-24817							
The enclosed "Application by Foreign Corporation for Authorization to "Certificate of Existence", and check are submitted to register the above to transact business in Florida.	Transact Business in Florida", e referenced foreign corporation							
Please return all correspondence concerning this matter to the following	3:							
BOB CUDDIHY	<del>.</del>							
(Name of Person)								
NATIONAL AUTO CREDIT, INC.								
(Firm/Company)								
555 MADISON AVE., 29TH FLOOR								
(Address)								
NEW YORK, NY 10022 _	<del>-</del> · ·							
(City/State and Zip code)								
For further information concerning this matter, please call:								
BOB CUDDIHY at ( 212 ) 644-1400	O1							
(Name of Person) (Area Code & Daytime	Telephone Number)							
JAN (ible)	FILI OCT 25 NETARY MIASSE							
STREET ADDRESS:MAILING ADRegistration SectionRegistration SeDivision of CorporationsDivision of Cor409 E. Gaines St.P.O. Box 6327Tallahassee, FL 32399Tallahassee, FL	DRESS: FOR M D Proporations ORD 22:							
Enclosed is a check for the following amount:	int							
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$78.75 Filing Fee Certificate of Status □ \$78.75 Filing Fee Certified Copy								



#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 22, 2001

BOB CUDDIHY 555 MADISON AVE., 29TH FL NEW YORK, NY 10022

SUBJECT: NAC, INC.

Ref. Number: W01000024317

We have received your document for NAC, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

### Adding "of Florida" or "Florida" to the end of a name is not acceptable:

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) 245-6097.

Michael Mays Document Specialist

Letter Number: 501A00057949

### RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned Robert V Cudding Ir., do hereby certify	
that this Resolution of the Board of Directors of	_
(Corporate Name)	<del>-</del>
a corporation duly organized and existing under the laws of the State of Delaware,	
was duly adopted on October 1, 2001  Be it resolved, that NAC Inc.  (Corporate Name)	<u> </u>
organized and existing in the State of <u>Delaware</u> , hereby adopts the name	
NACCT, INC. for use in Figure 2.	
Dated: 10/01/2001	
Signature of either Chairman, Vice Chairman or any officer	
Robert V Cuddiny Ir. James Mc Na mara  Type or print name Chief Executive OFA  Chief Financial Officer Chief Executive OFA	L.cer

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. NAC, INC	1									_
	oration; must include the word "INCORPOI									_
	viations of like import in language as will c				it is a corp	oration	instead o	of a		
natural person o	or partnership if not so contained in the name	ne at p	oresen	t.)						
DELAWARE	20.0	3.	34-	16497	99					
(State or country	y under the law of which it is incorporated)				(FEI nu	mber, if	applicab	le)		_
. JULY 31,	1990	5.	PER	PETUA	L					
(Dai	te of incorporation)	-	(Dura	ation: Y	ear corp.	will cea	se to exis	st or "perpe	tual")	_
. UPON QUA	LIFICATION									
(Date first transa	acted business in Florida. If corporation ha (SEE SECTIONS 607.						nsert "up	on qualifica	ation.")	)
, 555 MADI	SÖN AVE., 29TH FLOOR, NEW Y	ORK.	NY	1002	2			-		
-	(Principal office	addr	ess)							-
555 MADI	SON AVE., 29TH FLOOR, NEW Y	ORK	NY	1002	2					
	(Current mailing						-			-
								700	0	
PERSONAL	SERVICES							_ <u>e</u>		
(Purpose	(s) of corporation authorized in home state	or co	ıntry t	o be car	ried out in	a state of	f Florida)	) '≥器	30	$\neg$
. Name and <u>str</u>	reet address of Florida registered age	ent:	(P.O.	Box or	Mail Dr	ор Вох	NOT a	ccepfable)	. 2	=
Name:	CT CORPORATION SYSTEM							EF.	٥.	П
Name:					-			F.S.:	=	
Office Address:	1200 SOUTH PINE ISLAND RD.		-			-	•	울	.;	-
	PLANTATION			Florid	a 33324	4		DA T	00	
	(City)		,	TIOTIC		code)	•	-		
					, -	·				
	agent's acceptance:		c		- C 47	t				
	ned as registered agent and to accept s is application, I hereby accept the appo									
	comply with the provisions of all statu									
uties, and I am	familiar with and accept the obligation	ns of	my p	osition	as regis	tered a	gent.	_	•	•
				a						
	Pare la	1 16	9/1	11			a. Gilbe Mat Sec			
<del>-</del>			w	uer				<u>-</u>		
	(Registered agent	น 5 512	gnature	<b>=</b> )						

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. DIRE	CTORS			
Chairman:				
Address: _				
Vice Chain	man:			
Director: _	HENRY TO			
	SEE MADICAL SAME OF THE ORD			
_	NEW YORK, NY 10022			
Director: _	<u> </u>	÷	. <u>-</u>	
B. OFFIG	CEDC "			-
	JAMES MCNAMARA 555 MADISON AVE., 29TH FLOOR		SE TAN	
Address: _			ECR C	
_	NEW YORK, NY 10022			<u> </u>
Vice Presid	lent: BOB CUDDIHY		25 888 888	
Address: _	555 MADISON AVE., 29TH FLOOR		AM OF S	
	NEW YORK, NY 10022		2: 1 TAT ORII	
Secretary:			00 E DA	
Address: _				
	Bob adding			
Address:	555 Madison Ave, 29 th Floor	- NY NY	1 BOZZ	
Address	7,000			
NOTE: I	f necessary, you may attach an addenaum to the applicatio	n listing additional o	officers and/or directors.	
13	Machile			
	(Signature of Clauman, Vice Chairman, or any office	cer listed in number	12 of the application)	
14. <u>B</u> 0	OB CUDDIHY - VICE PRESIDENT			
	(Typed or printed name and capacity of persons)	son signing application	on)	

## State of Delaware Office of the Secretary of State PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NAC, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINTH DAY OF OCTOBER, A.D. 2001.

FILED

01 OCT 25 M 2: 00

SECRETARY OF STATE ORIDA



Warriet Smith Windson, Secretary of State

AUTHENTICATION: 1381002

DATE: 10-09-01

2232575 8300

010501293