F02000004204

TRANSMITTAL LETTER

TO:

Registration Section

Division of Corporation		
SUBJECT: 25	OL, Inc.	
	(Name of corporation - must include suf	ffix)
Dear Sir or Madam:		
The enclosed "Application by "Certificate of Existence", and to transact business in Florida.	Foreign Corporation for Authorization to Tradiction to Tradiction and the submitted to register the above research.	ansact Business in Florida", ferenced foreign corporation
Please return all corresponden	ce concerning this matter to the following:	
		6000069180267:
1504,	(Name of Person) Inc.	5000069180267 -08/08/02-01047006 *****87.50 *****87.50
	(Firm/Company)	
639 /	Main Street	
Avoca,	Main Street PA 18641	
	(City/State and Zip code)	
For further information concer Joseph Limon ge // (Name of Person)	at (<u>570</u>) 4/9- 78 (Area Code & Daytime Tel	27 lephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	MAILING ADDR Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 3	RESS: on rations
Enclosed is a check for the foll	lowing amount:	
	78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status Certified Copy	& \$87.50 Filing Fee, Certificate of Status & Certified Copy
1,44,671	Ap ²	ON WOOD WIN



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

August 7, 2002

BRADLEY WALTER 639 MAIN STREET AVOCA, PA 18641

SUBJECT: LSDL, INC.

Ref. Number: W02000022755

02 AUG 19 Kil St 33 FEDERALD AND ST 33

We have received your document for LSDL, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

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.

Marsha Thomas Document Specialist

Letter Number: 802A00047086

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. LSDL, 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. Pennsylvania (State or country under the law of which it is incorporated) (FEI number, if applicable)
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 4-9-99 (Date of incorporation) (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") 6
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 639 Main Street P.O. Box 184
Avoca, PA 18641
(Current mailing address)
8. To furnish interest - free service contract financing to automobile deal
(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: CT Corporation System
Office Address: 1200 South Pine Island Road
The state of the s
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 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. (CT Sorporation System ANN J. WILLIAMS
Assistant Vice President
(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. **Detailed Pittacked**

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable) FLO19 - 9/2/99 C T System Online

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407 McAlpine St., P.O. Box 184 • Avoca, PA 18641-0184 570-414-0480 • 1-866-230-7935 • Fax 570-414-7883

LSDL, INC.
BOARD OF DIRECTORS
OFFICERS
ADDRESS LIST 2002

JOSEPH LIMONGELLI (PRESIDENT)

BUSINESS ADDRESS 639 MAIN STREET AVOCA, PA 18641 570-414-8877

SALVATORE DEFRANCESCO (VICE PRESIDENT)

> BUSINESS ADDRESS 639 MAIN STREET AVOCA, PA 18641 570-414-8877

DANIEL LIMONGELLI (TREASURER)

BUSINESS ADDRESS 639 MAIN STREET AVOCA, PA 18641 570-414-8877

JOHN STULTZ (SECRETARY / CHAIRMAN)

> BUSINESS ADDRESS 639 MAIN STREET AVOCA, PA 18641 570-414-8877



COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

JULY 15, 2002

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

LSDL, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

DPOS