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(Re	equestor's Name)	
(Ac	idress)	
•	,	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
<b>—</b>		
<b>n</b>		
(Bu	isiness Entity Nan	ne)
-		
	ocument Number)	
(Di	cament Number)	
Certified Copies	Certificates	of Status
<u> </u>		
Special Instructions to	Filing Officer:	
		,
		<u></u>

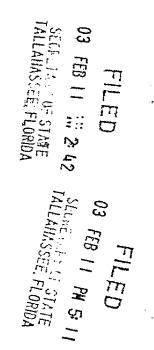




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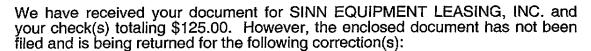
### FLORIDA DEPARTMENT OF STATE Ken Detzner Secretary of State

January 23, 2003

LOUIS M. MEINERS, JR. ADVOCATE CONSULTING 9229 DELEGATES ROW, SUITE 490 INDIANAPOLIS, IN 46340

SUBJECT: SINN EQUIPMENT LEASING, INC.

Ref. Number: W03000002029



Please note that we have RETAINED your \$125.00 payment, and the original Delaware Certificate of Status for this corporation.

Since SINN EQUIPMENT LEASING, INC. is a corporation, it cannot use the limited liability company form.

Please complete and return the enclosed application for a FOREIGN CORPORATION.

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) 245-6914.

Letter Number: 203A00004138

Buck Kohr Corporate Specialist



#### TRANSMITTAL LETTER

TO: Registration Section								
Division of Corporations								
SUBJECT:	SINN EQUIPM	ENT LEASING, INC.	3					
		corporation - must include suffix)	1 8 B					
Dear Sir or Madam:			TANKSEE TO BE					
		uthorization to Transact Business is referenced foreign corporation to						
Please return all correspondence c	oncerning this matter t	o the following:	7					
<u> </u>	LOUIS	M. MEINERS, JR.						
	(Na	me of Person)						
	ADVOCA	TE CONSULTING						
	(Fi	·m/Company)						
	9229 DELEG	ATES ROW, SUITE 490						
		(Address)						
	(NID) A	NAPOLIS, IN 46240						
		tate and Zip code)	<u> </u>					
		• ,						
For further information concerning	g this matter, please ca	II:						
DANIEL CHEUNG	at	(317) 581-4070	<u></u>					
(Name of Person)	(Name of Person) (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 follow	ing amount:							
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	X \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy					

#### . 'APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN RE	COMPLIANC GISTER A FO	E WITH SECTION REIGN CORPORA	607.1503, FLORIDA TION TO TRANSAC	STAT TBUS	TUTES, TH SINESS IN	E FOLLON THE STATI	VING IS SUBM E OF FLORIDA	TOBED TO	) r
1.	SINN EQU	IPMENT LEASIN	G, INC.					32.5	<u>M</u>
	words or abbro	eviations of like impo	the word "INCORPOF rt in language as will c so contained in the name	learly	indicate tha	ANY", "COF	RPORATION" of or oration instead of	3	£ .
2.	DELAWAI	RE		.3.	N/A DIS	SREGARDI	ED ENTITY	D.L.	
			which it is incorporated	)			number, if applic	able)	<u> </u>
4.	12/18/2002			5.,	PERPET				
		(Date of incorpora	ation)		(Duratio	on: Year cor	p. will cease to e	xist or "per	rpetual")
6.	12/19/2002		lorida. If corporation h	ag not	transacted h	usiness in El	lorida incart "un	on qualific	etion ")
	(Date IIIst tra		EE SECTIONS 607.15					on quanne	ation. )
7.	2861 34TH	STREET SOUTH			·		·	<u>.</u>	
			(Principa	ıl offic	e address)				
	ST. PETER	RSBURG, FL 3371	1						<u>.</u>
				mailin	g address)				<del></del>
8.		NT LEASING	tion authorized in home		·	. 1	CEI		<u> </u>
	()	rurpose(s) of corpora	iion authorized in nom-	e state	or country	to be carried	out in state of Fi	orida)	
9.	Name and st	reet address of Flo	rida registered agen	t: (P.C	O. Box or M	Mail Drop B	Box <u>NOT</u> accep	table)	
	Name:	LOUIS M. MEII	NERS, JR.	<u></u>					
Of	fice Address:	200 AVIATION	DRIVE, SUITE 2	<del></del>		:	-	. ,	
		NAPLES				Florida	34104		
			(City)			_	(Zip code)	·	
Ha de: fur	wing been nai signated in thi rther agree to	is application, I her comply with the pr	gent and to accept se ceby accept the appoin ovisions of all statute accept the obligation	ntmen s rela	it as registe tive to the	ered agent ( proper and	and agree to act complete perfo	t in this ca	apacity. I
	-	Z	Quis M. 1	Me. I agent	MOAS L's signature	gn.	<del></del>	<u> </u>	. 4 ,

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

STF FL32376F.1

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: KLAUS SINN Address: 2861 34TH STREET\_SOUTH ST, PETERSBURG, FL 33711 B. OFFICERS President: KLAUS SINN Address: 2861 34TH SREET SOUTH ST. PETERSBURG, FL 33711 Vice President: Secretary: KLAUS SINN Address: 2861 34TH STREET SOUTH, ST. PETERSBURG, FL 33711 Treasurer: KLAUS SINN Address: 2861 34TH STREET SOUTH, ST. PETERSBURG, FL 33711 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) -LOUIS M. MEINERS, JR. KLANS SINN (Typed or printed name and capacity of person signing application)

# Delaware The First State PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SINN EQUIPMENT LEASING, 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 EIGHTEENTH DAY OF DECEMBER, A.D. 2002.



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AUTHENTICATION: 2157951