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TRANSMITTAL LETTER

TALLAHASSEE, FLOR

	ration Section on of Corporations
SUBJECT:	Lease Assurance Corporation
SCHOLCI.	(Name of corporation - must include suffix)
Dear Sir or Ma	ıdam:
"Certificate of	Application by Foreign Corporation for Authorization to Transact Business in Florida", Existence", and check are submitted to register the above referenced foreign corporation iness in Florida.
Please return a	ll correspondence concerning this matter to the following:
Phillip S. H	lofmann
-	(Name of Person)
Lease Ass	surance Corporation
	(Firm/Company)
801 Intern	ational Parkway, 5th Floor
11 406	(Address)
Lake Mary	v, Florida 32746
	(City/State and Zip code)
For further info	ormation concerning this matter, please call:
Phil Hofma	nn at (407) 562-1935
(Name	e of Person) (Area Code & Daytime Telephone Number)
STREET ADI Registration Se Division of Co 409 E. Gaines Tallahassee, Fl	Registration Section Opporations Division of Corporations St. P.O. Box 6327
Enclosed is a c	sheck for the following amount:
□ \$70.00 Filir	ng Fee

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO PM 12: 31
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDAL LARY OF STATE
TALLAHASSEF FLORIDA

1.	Lease As:	Lease Assurance Corporation			
	words or abbre	oration; must include the word "INCORPORAT! viations of like import in language as will clearly or partnership if not so contained in the name at	y indicate that it is a corporation instead of a	· - 	
2.	Nevada	3.	05-0542751		
	(State or country	y under the law of which it is incorporated)	(FEI number, if applicable)		
4.	11-14-0	2 _{5.}	Perpetual		
	(Dat	te of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	_	
6.	Upon Qu	alification			
٠.			transacted business in Florida, insert "upon qualification."), 607.1502 and 817.155, F.S.)	ent of the	
7,801 International Parkway, 5th Floor, Lake Mary , Florida 32746 (Principal office address)					
		(Current mailing addi	ress)		
8.		nding for heavy equiptment compani			
	(Purpose	(s) of corporation authorized in home state or co	untry to be carried out in state of Florida)	• • •	
9.	Name and str	reet address of Florida registered agent:	(P.O. Box or Mail Drop Box NOT acceptable)		
	Name:	Phillip S. Hofmann			
0:	ffice Address:	801 International Parkway, 5th floo	<u>r</u>	e for tour. Og kom	
		Lake Mary	Florida 32736		
		(City)	(Zīp code)		

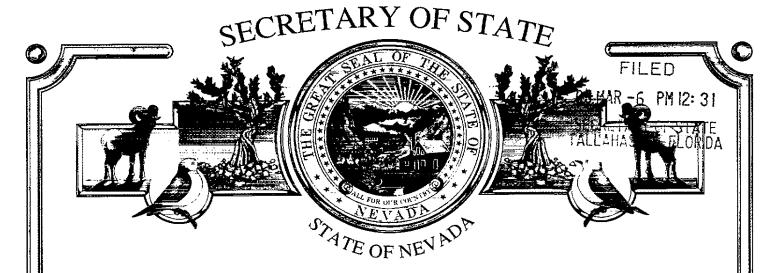
10. Registered agent's acceptance:

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.

(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	03 MAR -6 PM 12		
Chairman: Glenn A. LaPointe	LLSFTARY OF ST		
Address: 1420 Windsor Av.	TALLAHASSEE, FLO		
Longwood, Florida 32750			
Vice Chairman: Phillip S. Hofmann	•		
Address: 1420 Windsor Ave.	- ·		
Longwood, Florida 32750			
Director:			
Address:			
Director:			
Address:			
B. OFFICERS			
Glenn A. LaPointe			
1420 Windsor Ave			
Longwood, Fl. 32750			
Vice President: Phillip S. Hofmann			
Address: 1420 Windsor Ave	 		
Longwood, Florida 32750			
Secretary:			
Address:	 1		
	 		
Treasurer:			
	·		
NOTE: If necessary, you may attach an addendum to the application listing additional officers a	and/or directors.		
13. Jon S. The Vice Charman			
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of th	e application)		
14. PHILLIP S. FLOFMANN VICE CHAIRMA (Typed or printed name and capacity of person signing application)	<u>, 2</u>		



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **LEASE ASSURANCE CORPORATION**, as a corporation duly organized under the laws of **NEVADA** and existing under and by virtue of the laws of the State of Nevada since November 14, 2002, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on February 13, 2003.

DEAN HELLER Secretary of State

⊳у

Certification Clerk