

F03000005231

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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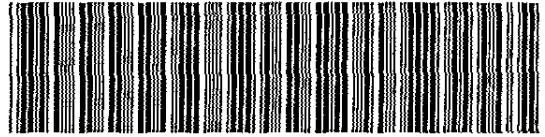
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2003 OCT 14 PM 2:40
TALLAHASSEE, FLORIDA
REGISTRATION

J. BRYAN OCT 23 2003

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Uni-Select USA South Central, Inc.
(Name of corporation - must include suffix)

FILED
2003 OCT 14 PM 2:30
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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:

Joan Rudolph

(Name of Person)

Faegre & Benson LLP

(Firm/Company)

90 South Seventh Street

(Address)

Minneapolis, MN 55402

(City/State and Zip code)

For further information concerning this matter, please call:

Joan Rudolph

(Name of Person)

at (612) 766-7217

(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

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

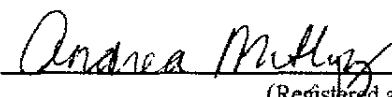
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

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TALLAHASSEE, FLORIDA

1. Uni-Select USA South Central, 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. Minnesota 3. 41-1950828
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 9-22-1999 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. 2525 N. Fairview Avenue, St. Paul, MN 55113
(Principal office address)
as above
(Current mailing address)
8. wholesale distribution of auto parts
(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
Plantation, Florida 33324
(City) (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 my position as registered agent.


(Registered agent's signature)
Andrea Mittyng
Assistant Secretary

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: See Attached List

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See Attached List

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. _____

Pierre Chesnay, Secretary

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

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ATTACHMENT

UNI-SELECT USA SOUTH CENTRAL, INC.

Officers and Directors:

Directors:

<u>Name</u>	<u>Address</u>
Florent Jacques	170 Industriel Boulevard, Boucherville, Quebec, Canada, J4B 2X3
Bill McConnell	641 Phelan Avenue, Memphis, TN 38126
John Rutland	641 Phelan Avenue, Memphis, TN 38126

Officers:

<u>Name</u>	<u>Title</u>	<u>Address</u>
John Rutland	President	641 Phelan Avenue, Memphis, TN 38126
Pierre Chesnay	Secretary	170 Industriel Boul., Boucherville, Quebec, Canada, J4B 2X3

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TALLAHASSEE, FLORIDA

State of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

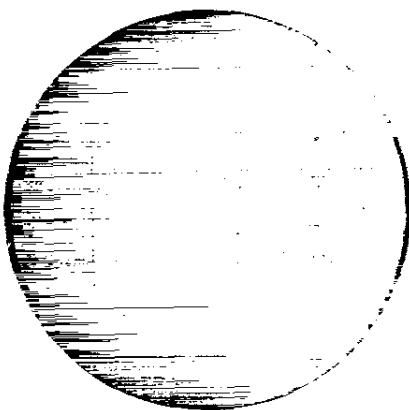
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: Uni-Select USA South Central, Inc.

Date Formed: 09/22/1999

Chapter Governed By: 302A

This certificate has been issued on 10/01/03.



Mary Kiffmeyer
Secretary of State.

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CLERK OF THE SECRETARY OF STATE
TALLAHASSEE, FLORIDA