F0500001107

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MAY 31 2017

K. WHILE

COVER LETTER

TO: Amendment Section Division of Corporations	
Mishawka Leasing Co., Inc.	
Na	ame of Corporation
DOCUMENT NUMBER: F0500000110'	7
The enclosed Amendment and fee are su	abmitted for filing.
Please return all correspondence concern	ning this matter to the following:
Christy Bettis	
Name of Contact Person	
Harbor Capital Leasing, Inc	
Firm/Company	
7901 Southparl Plaza suite 204	
Address	
Littleton CO 80120	
City/State and Zip Cod	e
info@harborcapital.net	
E-mail address: (to be used for future a	annual report notification)
For further information concerning this	matter, please call:
Christy Bettis	303 268-6560
Name of Contact Person	at (
Enclosed is a check for the following am	nount:
\$35.00 Filing Fee \$43.75 Filing F Certificate of S	\$43.75 Filing Fee & \$52.50 Filing Fee, Certified e of Status & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 26, 2017

CHRISTY BETTIS / HARBOR CAPITAL LEASING INC 7901 SOUTHPARL PLAZA SUITE 204 LITTLETON, CO 80120 US

SUBJECT: MISHAWAKA LEASING CO., INC.

Ref. Number: F05000001107

We have received your document for MISHAWAKA LEASING CO., INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

THAY 30 AM 8: 2

Letter Number: 617A00001684



March 13, 2017

Florida department of State Division of Corporations

Harbor Capital Leasing, LLC. would like to release the name Harbor Capital Leasing, LLC for we do not intend to conduct business under this name. We have no intentions of reinstating the name at a future date.

Thank you for your assistance and please feel free to call me if you have questions.

Sincerely,

Mary Ebele

Vice President

Mary Ebel

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

F05000001107	
(Document num	ber of corporation (if known)
1. Mishawaka Leasing Co., Inc.	
	ars on the records of the Department of State)
2. Illinois	3. O2/23/2005 (Date authorized to do business in Florida)
(Incorporated under laws of)	(Date authorized to do business in Florida)
	ECTION II LY THE APPLICABLE CHANGES)
4. If the amendment changes the name of the corpora	tion, when was the change effected under the laws of
its jurisdiction of incorporation? 11/23/2015	
5 Harbor Capital Leasing, Inc.	
(Name of corporation after the amendment, adding appropriate abbreviation, if not contained in new	suffix "corporation," "company," or "incorporated," or name of the corporation)
The Chaids are also	The production of the second control of the
business in Florida)	ate corporate name adopted for the purpose of transacting
6. If the amendment changes the period of duration, i	ndicate new period of duration.
	New duration)
7. If the amendment changes the jurisdiction of incor	
·	ew jurisdiction)
8. Attached is a certificate or document of similar im 90 days prior to delivery of the application to the E having custody of corporate records in the jurisdict	port, evidencing the amendment, authenticated not more than bepartment of State, by the Secretary of State or other official tion under the laws of which it is incorporated.
(Signature of a director, p	resident or other officer - if in the hands rt appointed fiduciary, by that fiduciary)
Jane Rethmeier	CEO
(Typed or printed name of person signing)	(Title of person signing)

File Number

6118-983-1



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

HARBOR CAPITAL LEASING, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON AUGUST 16, 2000, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 10TH day of MARCH A.D. 2017.

Authentication #: 1706902688 verifiable until 03/10/2018
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that



In Testimony Whereof, I hereto set
my hand and cause to be affixed the Great Seal of
the State of Illinois, this 21ST
day of APRIL A.D. 2017.

Authentication #: 1711101401 verillable until 04/21/2018.
Authenticate al: http://www.cyberdrivelilinois.com

Desse White

SECRETARY OF STATE