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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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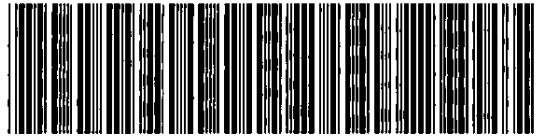
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2009 MAY 18 P 1:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 20 2009
D.A. WHITE

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COVER LETTER

2009 MAY 18 P 1:45

TO: New Filing Section
Division of Corporations

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: Jake Sweeney Auto Leasing Inc

Name of corporation - must include suffix

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:

Jan L Meyer

Name of Person

Jake Sweeney Auto Leasing Inc

Firm/Company

8755 Fields Ertel Rd

Address

Cincinnati OH 45249

City/State and Zip code

jmeyer@sweeneyauto.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jan L Meyer

Name of Person

at (513) 489-5253

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing 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**

FILED

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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1. Jake Sweeney Auto Leasing Inc

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "SECRETARY OF STATE
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.") TALLAHASSEE, FLORIDA

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. OH

(State or country under the law of which it is incorporated)

3. 31-0675574

(FEI number, if applicable)

4. 2-13-1956

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 05-06-2009

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 8755 Fields Ertel Rd Cincinnati OH 45249

(Principal office address)

8755 Fields Ertel Rd Cincinnati OH 45249

(Current mailing address)

8. Auto Leasing

(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 NOT acceptable)

Name: Absolute Perfection Limousine LLC
Service

Office Address: 8220 SW 44th Terrace

Gainesville, Florida 32608

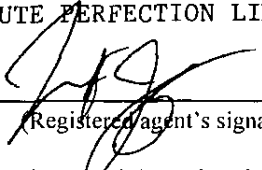
(City)

(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.

ABSOLUTE PERFECTION LIMOUSINE SERVICE LLC


(Registered agent's signature)

JEREMIAH F JOHNS Managing Member

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:

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A. DIRECTORS

Chairman: _____

2009 MAY 18 P 1:45

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: David K Loper

Address: 515 Oliver Ct

Wyoming OH 45215

Vice President: Mary S Sweeney

Address: 4331 Bayshore Blvd NE

St. Petersburg FL 33703

Secretary: Deborah S Cassinelli

Address: 450 Glendale Ave Cincinnati OH 45246

Treasurer: Pamela J Schneider

Address: 330 Ashley Ln Wyoming OH 45215

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. David K Loper President

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

**United States of America
State of Ohio
Office of the Secretary of State**

I, Jennifer Brunner, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show JAKE SWEENEY AUTO LEASING, INC., an Ohio corporation, Charter No. 252986, having its principal location in Cincinnati, County of Hamilton, was incorporated on February 13, 1956 and is currently in GOOD STANDING upon the records of this office.

FILED
2009 MAY 18 P 1:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



*Witness my hand and the seal of the
Secretary of State at Columbus, Ohio
this 15th day of May, A.D. 2009*

A handwritten signature in cursive script, reading "Jennifer Brunner".

Ohio Secretary of State