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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

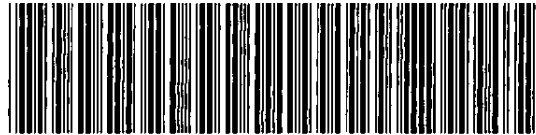
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EP 6/15/09

# ALSTON & BIRD LLP

One Atlantic Center  
1201 West Peachtree Street  
Atlanta, Georgia 30309-3424

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Corporate Paralegal

Direct Dial: 404-881-7442  
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June 11, 2009

## ***BY UPS OVERNIGHT***

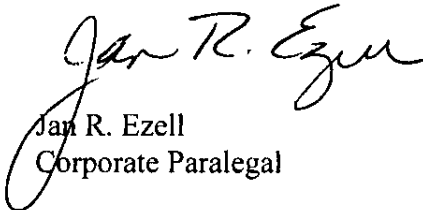
Florida Department of State  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

Ladies and Gentlemen:

Enclosed for filing is an Application by Foreign Corporation for Authorization to Transact Business in Florida for Parts Professional, Inc. Also enclosed are a Certificate of Existence for the company and a check in the amount of \$70 in payment of the filing fee. I have enclosed an extra copy of the form to be date-stamped and returned to me in the enclosed self-addressed stamped envelope.

Thank you for your assistance. If you have any questions, please call me at (404) 881-7442.

Sincerely yours,



Jan R. Ezell  
Corporate Paralegal

JRE/lal  
Enclosures  
ATL01/10001422v1

**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.

1. Parts Professional, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. Georgia

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

3. 27-0296175

(FEI number, if applicable)

4. 6/2/2009

(Date of incorporation)

5. perpetual

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

6. 7/1/2009

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 114 North Boulevard, Leesburg, FL 34748

(Principal office address)

114 North Boulevard, Leesburg, FL 34748

(Current mailing address)

8. sales of automotive 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 NOT acceptable)

Name: James Disterhaupt

Office Address: 114 North Boulevard

Leesburg, Florida 34748

(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)

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.

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: See attached

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: See attached

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

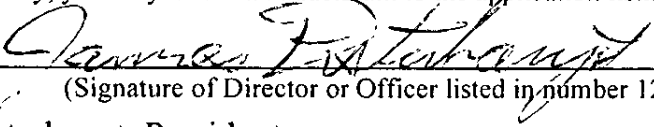
Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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TALLAHASSEE, FLORIDA

**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. James Disterhaupt, President

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

**ATTACHMENT TO  
APPLICATION BY FOREIGN CORPORATION FOR  
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA  
FOR  
PARTS PROFESSIONAL, INC.**

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Director: James Disterhaupt

Address: 114 North Boulevard  
Leesburg, FL 34748

Director: Jamie Disterhaupt

Address: 114 North Boulevard  
Leesburg, FL 34748

Director: Mike Foster

Address: 1090 Haines Street  
Jacksonville, FL 32206

**B. OFFICERS**

President and Secretary: James Disterhaupt

Address: 114 North Boulevard  
Leesburg, FL 34748

Vice President and Treasurer: Jamie Disterhaupt

Address: 114 North Boulevard  
Leesburg, FL 34748

Vice President: Tom Hancock

Address: 2999 Circle 75 Parkway  
Atlanta, GA 30339

Assistant Secretary: Mike Foster

Address: 1090 Haines Street  
Jacksonville, FL 32206

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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# STATE OF GEORGIA

## Secretary of State

Corporations Division  
315 West Tower  
#2 Martin Luther King, Jr. Dr.  
Atlanta, Georgia 30334-1530

### CERTIFICATE OF EXISTENCE

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TALLAHASSEE, FLORIDA

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

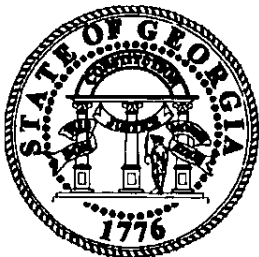
#### **PARTS PROFESSIONAL, INC.**

##### **Domestic Profit Corporation**

was formed or was authorized to transact business on 06/02/2009 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 11th day of June, 2009

Karen C Handel  
Secretary of State