# F09000002527

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



800156377238

06/15/09--01020--001 \*\*87.50

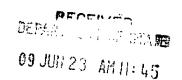
SECRETARY OF STATE ALLAHASSEE FINSING

JUN 24 2009 D. A. WHITE

#### **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: Ddysscy Antomotive Specialty 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:
Alccia D'Connar Name of Person
Name of Person
Odyssey Antomative Specialty Firm/Company
Firm/Company
317 Richard Mine Road Address
Address
Whathon New Eurscy 07885 City/State and Zip code
City/State and Zip code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (9+3) 328-2667  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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\ \text{Certificate of Status}\$ \$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certified Copy \$\ \text{Certified Copy}\$





FLORIDA DEPARTMENT OF STATE Division of Corporations

June 16, 2009

ALECIA O'CONNOR ODYSSEY AUTOMOTIVE SPECIALTY 317 RICHARD MINE ROAD WHARTON, NJ 07885

SUBJECT: ODYSSEY AUTOMOTIVE SPECIALTY, INC.

Ref. Number: W09000028086

We have received your document for ODYSSEY AUTOMOTIVE SPECIALTY, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White Regulatory Specialist II

Letter Number: 209A00020404

### 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 23 P 2: 18
1. CEnter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "LAHASSEE, FLORIDA"  "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "14. ATIASSEE, FLORIDA" "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. New Susy 3. 22-2265545  (State or country under the law of which it is incorporated)  4. D8/1-1-1979  (Date of incorporation)  (Duration: Year corp. will cease to exist or "perpetual")
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 08/10/1979 5. YWPetual
6. Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 317 Richard Mine Road, Wherhan MS 07885
(Findipal Office addices)
317 Richard Mine Rosed, Whatton NS 07885 (Current mailing address)
8. To Scill or market Cubinets? Vehicle Conversion.  (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: Alice Pollard
Office Address: 5547 Fairway Park DR Bldg 13 Apt 105  Boynton Bch, Florida 33437.  (City) (Zip code)
By By
Doyn for Den , Florida 393/. (City) (Zin 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	FILED
Chairman:	
Address:	7009 JUN 23 P 2: 18
Vice Chairman:	SECRETARY OF STATE TALLAHASSEE. FLORIDA
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Larry Kahan	
Address: 6 Kint Con	4
Flanders, No	5 07836
	pinan
Address: 2122 EIK (	ane
Blakostee P.	A 18610
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to th	e application listing additional officers and/or directors.
13. (Signature of Director or Officer 1)	isted in number 12 of the application)
	(a han
(Typed or printed name and capa	acity of person signing application)

### STATE OF NEW JERSEY DEPARTMENT OF TREASURY LONG FORM STANDING WITH OFFICERS AND DIRECTORS

FILED

#### ODYSSEY AUTOMOTIVE SPECIALTY, INC.

700 JUN 23 P 2: 18

0100094278

SECRETARY OF STATE TALLAHASSEE, FLORIDA

With the Previous or Alternate Name
CONVERSIONS BY ODYSSEY, INC. (Previous Name)

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on August 10, 1979.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Laurence Kahan Odyssey Automotive Specialty Inc 317 Richard Mine Rd Wharton, NJ 07885

I further certify that the incorporator is:

Stephen P. Giocondo 28 W State St Trenton, NJ 08608

I further certify that as of the date of this certificate, the following were listed as officers/directors of this business on the last Annual Report filed in this office on: February 13, 2009.

President

Laurence Kahan 6 Kent Ct Flanders, NJ 07836

## STATE OF NEW JERSEY DEPARTMENT OF TREASURY LONG FORM STANDING WITH OFFICERS AND DIRECTORS

FILED

#### ODYSSEY AUTOMOTIVE SPECIALTY, INC.

7朗 JUN 23 P 2:18

0100094278

SECRETARY OF STATE TALLAHASSEE, FLORIDA

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 12th day of June, 2009



Certification# 114605764

R. David Rousseau
Acting State Treasurer

Verify this certificate at https://www1.state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp