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November 13, 2009

VIA FEDERAL EXPRESS

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

Re: Michigan First Leasing Corporation, an Iowa corporation

Dear Sir/Madam:

Enclosed please find the following in connection with the registration of Michigan First Leasing Corporation, an Iowa corporation, as a foreign profit corporation to transact business in the State of Florida:

- 1. Cover Letter;
- 2. Application by Foreign Corporation for Authorization to Transact Business in Florida;
- 3. Original Certificate of Existence; and
- 4. \$70.00 check issued to the Florida Department of State for the registration fee.

Mark C. Dickinson

Direct Number: (515) 283-3166 • Facsimile: (515) 283-3108 • E-Mail: mcd@nyemaster.com 700 Walnut, Suite 1600 • Des Moines, IA 50309-3899 • (515) 283-3100

With offices in Des Moines, Ames and Cedar Rapids

New Filing Section Division of Corporations November 13, 2009 Page 2

This filing is being made in advance of the corporation's commencement of business activities in the State of Florida. Should you have any questions, please do not hesitate to

contact me. Thank you.

Mark C. Dickinson

MCD/jlw **Enclosures**

Thomas R. Bernau cc:

COVER LETTER

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TO: **New Filing Section** 289 NOV 15 P 2: 26 Division of Corporations SECRETARY OF STATE SUBJECT: MICHIGAN FIRST LEASING CORPORATION TALLAHASSEE, FLORIDA (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: Mark C. Dickinson (Name of Person) Nyemaster, Goode, West, Hansell & O'Brien, P.C. (Firm/Company) 700 Walnut, Suite 1600 (Address) Des Moines, IA 50309-3899 (City/State and Zip code) For further information concerning this matter, please call: Mark C. Dickinson at (515) 283-3166
(Area Code & Daytime Telephone Number) (Name of Person) STREET/COURIER ADDRESS: **MAILING ADDRESS:** New Filing Section New Filing Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301 Enclosed is a check for the following amount: **★** \$70.00 Filing Fee ____ \$78.75 Filing Fee & \$78.75 Filing Fee & \$87.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACTORIDA BUSINESS IN FLORIDA THE FOLLOWING IS SUBMITTED TO A PLANSACTORIDA.

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO LA

1. MICHIGAN FIRST LEASING CORPORATION				
	oration; must include "INCORPORATE ," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATION,"		
(If name unavailable	o in Florida, enter alternate corporate nar	ne adopted for the purpose of transacting business in Florida)		
2. IOWA	•	3. 26-3907510		
	ler the law of which it is incorporated)	(FEI number, if applicable)		
DECEMBER 18, 20	008	5. PERPETUAL		
	incorporation)	(Duration: Year corp. will cease to exist or "perpetual")		
NOT CURRENTLY	TRANSACTING BUSINESS IN FLO	RIDA		
•		s in Florida, if prior to registration) 1502, F.S., to determine penalty liability)		
4801 GRAND AVEN	NUB, DES MOINES, IOWA 50312			
	(Principal office as	ddress)		
4801 GRAND AVE	NUE, DES MOINES, IOWA 50312	<u> </u>		
_	(Current mailing a	ddress) .		
·	SINESS, INCLUDING CONSUMER R			
(Purpose(s) of	corporation authorized in home state or	country to be carried out in state of Florida)		
Name and street ad	dress of Florida registered agent: (P	O. Box NOT acceptable)		
Name:	C T Corporation System			
ffice Address:	1200 South Pine Island Road			
	Plantation	, Florida 33324		
	(City)	(Zip code)		
signated-in-this-appoint orther agree to comp	s registered agent and to accept ser lication, I hereby accept the appoin	vice of process for the above stated corporation at the place tment as registered agent and agree to act in this capacity. It relative to the proper and complete performance of my dutientian as registered agent. Kimberly Brounling		
Bv:		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.

(Registered agent's signature)

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

A. DIRECTORS

FILED

Chairma	THOMAS R. BERNAU	
Address:	4801 GRAND AVENUE	2651 NOV 16 P 2: 26
	DES MOINES, IOWA 50312	SECRETARY OF STATE
Vice Cha	irman;	TOUR TOUR TOUR TOUR TOUR TOUR TOUR TOUR
Address:		
Director:		
Address:		
Director:		
B. OFF	ICERS	
	THOMAS R. BERNAU	
	4801 GRAND AVENUE	
	DES MOINES, IOWA 50312	· · · · · · · · · · · · · · · · · · ·
	DIS MORES, IOWA 30312	
Vice Pres	ident:	
Address:		
Secretary:	THOMAS R. BERNAU	
Address:	AND COLOR ATTORNE DESIGNATION OF THE PARTY O	
Treasurer:	THOMAS R. BERNAU	
	4801 GRAND AVENUE, DES MOINES, IOWA 50312	
NOTE:	If necessary, you may attach an addendum to the application listing additi	ional officers and/or directors.
13. T	homas & bunan tra_	
.v. <u></u> .	(Signature of Director or Officer listed in number 12 of the	application)
14. THO	MAS R. BERNAU, PRESIDENT	
	(Typed or printed name and capacity of person signing ap	plication)

IOWA SECRETARY OF STATE MICHAEL A. MAURO



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2699 NOV 16 P 2: 26

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Date: 11/12/2009

CERTIFICATE OF EXISTENCE

Name: MICHIGAN FIRST LEASING CORPORATION (490 DP - 372685)

Date of Incorporation: 12/18/2008

Duration: PERPETUAL

I, MICHAEL A. MAURO, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify that the corporation named on this certificate is in existence and was duly incorporated under the laws of Iowa, that all fees required by the Iowa Business Corporation Act have been paid by the corporation, that the most recent biennial corporate report required has been filed by the Secretary of State, and that articles of dissolution have not been filed.

Certificate ID: CS34767

To validate this certificate please visit the following web site and enter the certificate ID.

www.sos.state.ia.us/ValidateCertificate