

Florida Department of State  
Division of Corporations  
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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**FOREIGN PROFIT/NONPROFIT CORPORATION**

**Abra, Inc d/b/a Abra Auto Body & Glass, Inc.**

Certificate of Status	0
Certified Copy	0
Page Count	945
Estimated Charge	\$70.00

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

Help

*Handwritten signature and date 2/23/10*



February 22, 2010

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: ABRA AUTO BODY & GLASS  
REF: W10000008850

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

If you have any further questions concerning your document, please call (850) 245-6962.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: H10000038651  
Letter Number: 110A00004314

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## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** ABRA, 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," or "Certificate of Good Standing" 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:

Duane Rouse

Name of Person

ABRA Auto Body & Glass

Firm/Company

6601 Shingle Creek Parkway Suite 200

Address

Brooklyn Center, MN 55430

City/State and Zip code

drouse@abraauto.com

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

For further information concerning this matter, please call:

Duane Rouse

at (763)

585.6216

Name of Person

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:

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|---|--|---|---|

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**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. ABRA, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")  
  
ABRA Auto Body & Glass, Inc.  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. MN 3. 41-1484683  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 3/20/1984 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. upon filing  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 6601 Shingle Creek Parkway, Suite 200, Brooklyn Center, MN, 55430  
(Principal office address)  
  
6601 Shingle Creek Parkway, Suite 200, Brooklyn Center, MN, 55430  
(Current mailing address)
8. Damaged Vehicle Repair  
(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: C T Corporation System  
  
Office Address: 1200 South Pine Island Road  
  
Plantation, Florida 33324  
(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.*

C T Corporation System

By: Jeanne Nelson **Jeanne Nelson**  
(Registered agent's signature) **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.

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

A. DIRECTORS

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

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

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

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

Director: Scott Krohn (Executive VP - Operations)

Address: 6601 Shingle Creek Parkway, Suite 200

Brooklyn Center, MN 55430

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

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

B. OFFICERS

President: Roland Benjamin (President and CEO)

Address: 6601 Shingle Creek Parkway, Suite 200

Brooklyn Center, MN 55430

Vice President: Timothy Adelman (Executive VP - Business Development)

Address: 6601 Shingle Creek Parkway, Suite 200

Brooklyn Center, MN 55430

Secretary: Duane Rouse (Executive VP and CFO)

Address: 6601 Shingle Creek Parkway, Suite 200, Brooklyn Center, MN 55430

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

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

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. Roland Benjamin, President and CEO

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

State of Minnesota

## SECRETARY OF STATE

### Certificate of Good Standing

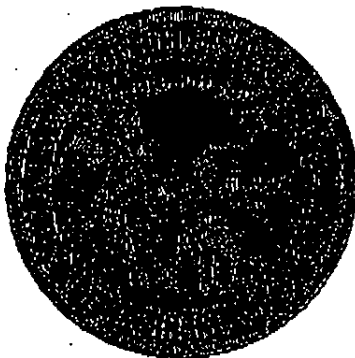
I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: ABRA, Inc.

Date Formed: 03/20/1984

Chapter Governed By: 302A

This certificate has been issued on 02/19/10.



*Mark Ritchie*  
Secretary of State.

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