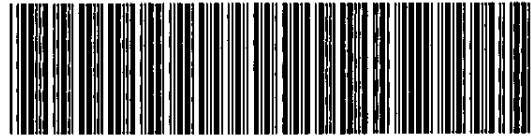


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: RICHARDSON, 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:

RAYFORD RICHARDSON
Name of Person

RICHARDSON, INC. D/B/A RICH'S CARWASH.
Firm/Company

1066 HILLCREST ROAD
Address

MOBILE AL 36695
City/State and Zip code

RAYFORD@RICHSCARWASH.COM.
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RAYFORD RICHARDSON at (251) 591-5681 - CELL
Name of Person Area Code & Daytime Telephone Number

633-4441 - DAY

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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

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

RICH'S CARRASH OF FLORIDA Inc
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. AIA 3. 63-0589467
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 1969 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 1066 Willcrest Rd. MOBILE AIA 36695
(Principal office address)

SAME AS ABOVE
(Current mailing address)

8. CARRASH
(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: INCSMART FLORIDA, INC.

Office Address: 4865 47TH PLACE

VERO BEACH, Florida 32907
(City) (Zip code)

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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.

David Ober
(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

PRES / Chairman: TIMOTHY L RICHARDSON
Address: 255 SUFFOLK ROAD 36608
MOBILE ALA

SECRETARY Vice Chairman: RAYFORD J. RICHARDSON
Address: 6069 BRANDY RUN Rd.
MOBILE ALA.

Director: _____
Address: _____
Director: _____
Address: _____

B. OFFICERS

President: SAME AS ABOVE
Address: _____

Vice President: SAME AS ABOVE
Address: _____

Secretary: RAYFORD J. RICHARDSON
Address: 6069 BRANDY RUN Rd. MOBILE ALA
Treasurer: _____
Address: _____

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

13. *R.J. Richardson* — RAYFORD J. RICHARDSON
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. RAYFORD J. RICHARDSON — SECRETARY OF RICHARDSON INC.
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



State of Alabama
Department of Revenue

Certificate of Good Standing

Richardson, Inc. is in compliance with the Alabama business privilege tax payment and return requirements in Chapter 14A, Title 40, Code of Alabama 1975 as of the date of issuance. This certificate is valid for sixty days from the date of issuance.

IN WITNESS WHEREOF, I hereunto set my hand this
date of November 16, 2011.

Richard A. Hannequin

Director, Individual and Corporate Tax Division

ATTEST:

Richard M. ...

Secretary

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Business Privilege Tax

Phone: 334-353-7923

Fax: 334-242-8915

Request Date: November 16, 2011

Request Code: 111116612139