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COVER LETTER

TO:	Registration Section Division of Corporations					
~~~~			MoBILE AUTÓ L <del>Auto Mobil</del> e Me	obanica Nistianal	Ino	
SUBJ	EC1:	Fioricien			- must include suffix	
Dear S	ir or M	adam:				
"Certif	ficate o	f Existenc		te of Good Star	nding" and check are su	act Business in Florida," bmitted to register the
Please	return	all corres _l	oondence concer	ning this matte	r to the following:	
Robert	Koenek	amp				
				Name of	Person	
Proficie	Nog ent Auto	KE AVTO	lechanics National	Inc.		
				Firm/Con	pany	
1300 H	eritage (	Club Aven	ue			
				Addre	ess	
Wake F	Forest, N	IC 27587				
		_ <del>:::_</del> _		City/State a	nd Zip code	
robert@	mleich	mohileauto	orepair.com			
100014	4. 4.0.14.	111001102011	E-mail addre	ss: (to be used	for future annual report	notification)
For fur	ther in	formation	concerning this	matter, please o	eall:	
Robert Koenekamp at (954			at (954	) 990 9333		
	Name	of Perso	n	Area Cod	e Daytime Telep	phone Number
Enclose	Regist Divisi Clifto 2661 I Tallah	tration Se on of Cor n Buildin Executive nassee, FL	porations B Center Circle		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, S	Section Corporations 17
		ing Fee	\$78.75 Fili Certificate	ng Fce & □	\$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 Proficient M05/	E MUTO Mechanics National Inc.				
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")					
(If name unavai	able in Florida, enter alternate corporate n	ame adopted for the purpose of transacting b	usiness in Florida)		
North Carolina		3			
(State or count	ry under the law of which it is incorporated	d) (FEI number, if applie	cable)		
June 15, 2017		5.			
	of incorporation)	5. (Date of duration, if other tha	n perpetual)		
(					
	,				
i	(Date first transacted busin (SEE SECTIONS 607,1501 & 6	ess in Florida, if prior to registration) 07.1502, F.S., to determine penalty liability)			
i	(Date first transacted busin (SEE SECTIONS 607.1501 & 6 Lane, Cary, NC 27519	less in Florida, if prior to registration) 07.1502, F.S., to determine penalty liability)			
310 Linden Park	(Date first transacted busin (SEE SECTIONS 607.1501 & 6 Lane, Cary, NC 27519	ess in Florida, if prior to registration)	····		
5. 7.310 Linden Park	(Date first transacted busin (SEE SECTIONS 607.1501 & 6 Lane, Cary, NC 27519 (Pa Raleigh, NC 27624	less in Florida, if prior to registration) 07.1502, F.S., to determine penalty liability)	····		
310 Linden Park PO Box 97282, i	(Date first transacted busin (SEE SECTIONS 607.1501 & 6 Lane, Cary, NC 27519 (Pa Raleigh, NC 27624	ness in Florida, if prior to registration) 67.1502, F.S., to determine penalty liability) rincipal office address) mailing address, if different)	2011 AUG 23		
310 Linden Park PO Box 97282, i	(Date first transacted busin (SEE SECTIONS 607.1501 & 6 Lane, Cary, NC 27519 (Pr Raleigh, NC 27624	ness in Florida, if prior to registration) 67.1502, F.S., to determine penalty liability) rincipal office address) mailing address, if different)	2011 AUG 23 PM		
PO Box 97282, i Name and stre	(Date first transacted busin (SEE SECTIONS 607.1501 & 6  Lane, Cary, NC 27519  (Properties of Florida registered agent:	ness in Florida, if prior to registration) 67.1502, F.S., to determine penalty liability) rincipal office address) mailing address, if different)	2011 AUG 23		
7. 310 Linden Park  PO Box 97282, 1	(Date first transacted busin (SEE SECTIONS 607.1501 & 6  Lane, Cary, NC 27519  (Proceedings) (Procedure of the components of the component	ness in Florida, if prior to registration) 67.1502, F.S., to determine penalty liability) rincipal office address) mailing address, if different)	2011 AUG 23 PM		

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.

> Jenifer Vincent Vice President & Assistant Secretary

(Registered agent's signature)

10. 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.

11. Names and business addresses of officers and/or directors:	FILE	
A. DIRECTORS	2017 AUG 23 PH L	
Chairman:	Correspond	
Address:	ELLAHASSEL, FLOR	
Vice Chairman:		
Address:		
Director:		
Address:	·	
Director:		
Address:		
	<u> </u>	
B. OFFICERS		
President: Robert Koenekamp		
Address: 1300 Heritage Club Avenue	· · · · · · · · · · · · · · · · · · ·	
Wake Forest, NC 27587		
Vice President:		
Address:		
Secretary:		
Address:		
Treasurer:		
Address:		
NOTE: Mnecessary, you may attach an addendum to the application listing additional addit	tional officers and/or directors.	
12.		
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 about are true and that he or she is aware that false information submitted in a document a third degree felony as provided for in s.817.155, F.S.		
13. Robert Koenckamp. President  (Typed or printed name and capacity of person signing ap	oplication)	



## NORTH CAROLINA Department of the Secretary of State

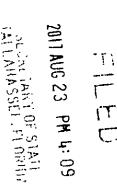
### CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

### PROFICIENT MOBILE AUTO MECHANICS NATIONAL INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 15th day of June, 2017, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.







Scan to verify online,

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 21st day of August, 2017.

Secretary of State

6 laine I Marshall

Certification# 101022277-1 Reference# 13978195- Page: 1 of 1 Verify this certificate online at http://www.sosnc.gov/verification