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(((H19000265746 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From;

Account Name : CAPITOL SERVICES, INC.

Account Number : 120160000017

Phone : (855)498-5500 Fax Number : (800)432-3622

\*\*Enter the email address for this business entity to be used for future 1; annual report mailings. Enter only one email address please.\*\*

Rmail Address:

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### FOREIGN PROFIT/NONPROFIT CORPORATION : PARTSHOTEL INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
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\*\*\*PLEASE GIVE THE ORIGINAL SUBMISSION DATE AS THE FILE DATE - 9/3/19



September 4, 2019

#### FLORIDA DEPARTMENT OF STATE Division of Corporations

CAPITOL SERVICES, INC.

\*\*\*PLEASE GIVE THE ORIGINAL SUBMISSION DATE AS

SUBJECT: PARTSHOTEL INC. THE FILE DATE - 9/3/19

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Brooke N Kinsey Regulatory Specialist II

FAX Aud. #: H19000264630 Letter Number: 519A00018136

#### **COVER LETTER**

TO:	Registration Section Division of Corporate				
cim,	·		PartsHote	l Inc.	
SUDA	ECT:	Name of cor		ust include suffix	
Dear :	Sir or Madam:				
"Certi above	ficate of Existence, referenced foreign	n by Foreign Corpora " or "Certificate of G corporation to transac ndence concerning th	ood Standing at business is	g" and check are sub n Florida.	et Business in Florida," mitted to register the
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	<u> </u>	F	irm/Compan	у	
		300 N. Mer	idian Stre	et, Suite 1100	<u></u>
-			Address		F O
		lndia	mapolis, I	N 46204	
		Cit	y/State and	Zip code	<del>-</del>
		outsourceda	eccounting	@bgbc.com	
	· · · · · · · · · · · · · · · · · · ·	E-mail address: (to	be used for	future annual report	notification)
For fi	urther information o	concerning this matter	, please call		
	David Richard	dt at(	317 )	633-47	00
	Name of Person	7	Area Code	Daytime Teles	shone Number
	STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	oorations     Center Circle		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section Corporations 17
Encl	osed is a check for t	he following amount:			
€ s	70.00 Filing F∝	☐ \$78.75 Filing Fe Certificate of St		78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Foc, 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. PartsHotel I	nc				
	rporation; must include "INCORPORATEL rrp," "Inc," "Co," or "Corp.")	OF "COMPANY," "CORPORATION."			
(If name unavaila	ble in Florida, enter alternate corporate nam	e adopted for the purpose of transacting business in Florida)			
2. Delaware		3. 30-1163874			
(Stare or country	under the law of which it is incorporated)	(FEI number, if applicable)			
4. January 3, 2	019	5 Perpetual . v.			
(Date	of incorporation)	(Date of duration, if other than perpetual)			
	(SEE SECTIONS 607.1501 & 607	in Florida, if prior to registration) 1502, F.S., to determine penalty liability) anapolis, IN 46204 cipal office address)			
7 300 N. Me	eridian Street, Suite 1100 Indi	anapolis, IN 46204			
	(P <del>ri</del> n	icipal office address)			
	(Current ma	iling address, if different)			
8. Name and street	nt address of Florida registered agent: (	P.O. Box NOT acceptable)			
Name:	Name: Capitol Corporate Services, Inc.				
Office Address:	515 E. Park Ave., 2nd FL	<del></del>			
	Tallahassee	, Florida 32301			
	(City)	(Zip code)			
Having been nan designated in this further agree to c	application. I hereby accept the appoint	ervice of process for the above stated corporation at the place intment as registered agent and agree to act in this capacity. I es relative to the proper and complete performance of my is of my position as registered agent.			
	Kim Tadlock	Kim Tadlock, Asst Sect on behalf of Capitol Corporate Services, Inc.			
-	· # ( · ·	ed egent'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.

DIRECTORS	
irman: N/A	
ress:	
Chairman: N/A	
ress:	
ector: Jussi Koljonen	
iress: 2645 Executive Park Drive	
Westin, FL 33331	
sctor: N/A	
TESI:	019 S
	SEP
OFFICERS	-3 P
Jussi Koljonen	
2645 Executive Park Drive	<u> </u>
Westin, FL 33331	
President: N/A	
nest:	
etary: N/A	
fress:	
esurer: N/A	
rest:	
TE: If necessary, you may extent an addendum to the application listing add	litional officers and/or directors.
Signature of Director or Officer or officer or officer or director signing this sociation (and who is listed in number 11 about and that he or she is aware that false information submitted in a document hird degree falony as provided for in s.817.155, P.S.	ove) affirms that the facts stated herein at to the Department of State constitutes
(Typed of printed name and capacity of person signing a	emplicático)

# Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PARTSHOTEL INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE THIRD DAY OF SEPTEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PARTSHOTEL INC."
WAS INCORPORATED ON THE THIRD DAY OF JANUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES
HAVE BEEN ASSESSED TO DATE.

2019 SEP -3 PM 4: 50

7221109 8300
SR# 20196839032
You may verify this certificate online at corp.delaware.gov/authwer.shtml

Authentication: 203519226

Date: 09-03-19