F95000004197

Document Number Only

C T CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, Florida 32301

City State Zip Phone

904-222-1092

CORPORATION(S) NAME

Coral Three Corporation

(✓) Profit
() NonProfit
() Limited Liability Company
(✓) Foreign

() Amendment
() Dissolution/Withdrawal

() Merger
() Mark

() Limited Partnership
() Reinstatement

() Annual Report
() Reservation

() Other
() Change of R.A.
() Fictitious Name

() Certified Copy
() Photo Copies
() CUS / G/S

() Call When Ready
(✓) Walk In
() Mail Out

() Call if Problem
() Will Wait

() After 4:30
(✓) Pick Up

mtn

300001574413
-08/31/95--01026--003
*****70.00 *****70.00

95 AUG 30 PM 12:4_

Name Availability	
Document Examiner	
Updater	
Verifier	
Acknowledgment	
W.P. Verifier	

3.00
8/30/95

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CR2E031 (1-89)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION 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. CORAL THREE CORPORATION
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION", or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Arkansas
(State or country under the law of which it is incorporated)

3. 71-0709098
(FEI number, if applicable)

4. October 2, 1991
(Date of incorporation)

5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")

6. Upon qualification
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.156, F.S.))

7. 111 Center Street
Little Rock, AR 72201
(Current mailing address)

8. Manufacture, distribution and sale of truck parts
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

FILED
95 NOV 30 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9. Name and street address of Florida registered agent:

Name: C T Corporation System

Office Address: c/o C T Corporation System, 1200 South Pine Island Road

Plantation, Florida, 33324
(Zip Code)

10. Registered agent 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 obligation of my position as registered agent.

C T Corporation System

(Registered agent's signature) (Officer)

Jonathan L. Miles, Asst. Secretary
(Type Name and Title of Officer)

(FL - 2189 - 11/16/94)

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 addresses of officers and/or directors:

A. DIRECTORS

Chairman: Jon E. M. Jacoby

Address: 111 Center Street

Little Rock, AR 72201

Vice Chairman: _____

Address: _____

_____

Director: _____

Address: _____

_____

Director: _____

Address: _____

_____

95 AUG 30 PM 12:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. OFFICERS

President: Jon E.M. Jacoby

Address: 111 Center Street

Little Rock, AR 72201

Vice President: Johnny R. Ponder

Address: 111 Center Street

Little Rock, AR 72201

Secretary: Heidi Williams

Address: 111 Center Street

Little Rock, AR 72201

Treasurer: _____

Address: _____

_____

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

13. Johnny R. Ponder
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Johnny R. Ponder, Vice President
(Typed or printed name and capacity of person signing application)

FILED
95 AUG 30 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(FLA. 2189)

State of Arkansas
SECRETARY OF STATE

Sharon Priest
SECRETARY OF STATE

FILED
95 AUG 30 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF GOOD STANDING
OF A
DOMESTIC CORPORATION

I, Sharon Priest, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show:

CORAL THREE CORPORATION

a corporation chartered under the laws of the State of ARKANSAS,
filed Articles of Incorporation OCTOBER 2, 1991.

I further certify that as far as the records show, this corporation is at this time chartered and in good standing, having met all the requirements governing a domestic corporation in this State.

In Testimony Whereof, I have hereunto set my hand and official seal, on this, the 25TH day of AUGUST, 19 95.

Sharon Priest
Sharon Priest, Secretary of State

by: David Morrow
DAVID MORROW
Corporations Division

C-2/Rev 10-1-88

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

96 OCT 28 PM 2:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F95000004197 (8)

1. Corporation Name

CORAL THREE CORPORATION

REINSTATEMENT 96

Principal Place of Business	Mailing Address
111 CENTER STREET LITTLE ROCK AR 72201	111 CENTER STREET LITTLE ROCK AR 72201

3. Date Incorporated or Qualified: 08/30/1995
3a. Date of Last Report:

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)

4. FEI Number: 71-0709898 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of [illegible] 607.0505, Florida Statutes.

SIGNATURE: Barbara Rhodes SPECIAL ASSISTANT SECRETARY 10-10-96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PCD JACOBY, JON E 111 CENTER STREET LITTLE ROCK AR	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V PONDER, JOHNNY R 111 CENTER STREET LITTLE ROCK AR	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S WILLIAMS, HEIDI 111 CENTER STREET LITTLE ROCK AR	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

700001931724 [illegible] Amount
-10/31/96--01030--010
****375.00 ****375.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [illegible] Pres. 9/9/96 501-377-2112
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (3/96)

0191608 FN