E95000004229

| C T CORPORATION BYSTE | M | | |
|---|---------------------------------------|---|--|
| Requestor's Name 660 East Juffurson Stre | pot | ំការប្រាក្សសម្រាស់ (85 ជា 25 ជាមេ) - អូរុម | |
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| | 32301 | | |
| | Phone 904-222-1092 TION(S) NAME | taruarning, papaga madakan magazings | |
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| | HHTP II, I | | |
| (*) Profit () NonProfit () Limited Liability Comp | () Amendment | () Merger | |
| (%Foreign | () Dissolution/Withdre | awal () Mark | |
| () Limited Partnership () Reinstatement | () Annual Report () Reservation | () Other () Change of R.A. | |
|) Certified Copy | () Photo Coples | () Fictitious Name () CUS/ G/S | |
|) Call When Ready Y Walk In) Mail Out | () Call if Problem () Will Wait | () After 4:30 () Pick Up | |
| lame vallability | 3:00 / | PLEASE DEVILIBAL PROPERTY SEE | |
| ocument xaminer | 8-3155 | PLEASE RETURN EXTRA COPY(S) FILE STAMPED | |
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| eriller | | 1 etc. | |
| cknowledgment | | # 8131 173 173 BILIS: 173 | |
| .P. Veriffer | | | |

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 | AHTP II, INC. | | | | | |
|---|---|------------------|----------|--|--|--|
| | (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATI words or abbreviations of like import in language as will clearly indicate that it is a corporation of a natural person or partnership if not so contained in the name at present.) | ON" o Insta | or ad | | | |
| 2 | State or country under the law of which it is incorporated) 3. 34-180560 (FEI number, if ap | 3. 34-1805601 | | | | |
| | (State or country under the law of which it is incorporated) (FEI number, if ap | plicab | la) | | | |
| 4 | June 13, 1995 5. Perpetual | | _ | | | |
| (Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual") | | | | | | |
| 6. | Vron Court | | | | | |
| 6. Upon Con.V. (Date first transacted business in Florida. (See sections 607.1501, 607.1502 and 817.156, F | | | | | | |
| 7. | 25101 Chagrin Boulevard | | | | | |
| | | | | | | |
| | Beachwood, Ohio 44122 | | | | | |
| | (Current mailing address) | | | | | |
| Ownership of partnership interest in partnership engaged in man 8. turing and selling automotive heat transfer products | | | | | | |
| | (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) | | • | | | |
| ۵ | Name and assess address of the State of the | Ŗ | 무 돈없 | | | |
| 9. Name and street address of Florida registered agent: | | | | | | |
| Name: CT CORPORATION SYSTEM | | | | | | |
| | Office Address: a/o C T Corporation Success 1990 South Biological Total | - 1 0 | | | | |
| | Office Address: c/o C T Corporation System, 1200 South Pine Island Road | FH 12: 4: | SIS | | | |
| | Plantation , Florida, 33324 | T | 語 | | | |
| | (Zip Code) | Ú. | Ī; | | | |
| | | | | | | |

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 obligations of my position as registered agent.

| C T CORPORATION SYSTEM | | | |
|--|--|--|--|
| - Allera W | | | |
| (Registered agent's signature) (Officer) | | | |
| Jeffrey R. Graves, Assistant Secretary | | | |
| (Type Name and Title of Officer) | | | |

11. Attached is a cortificate 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: SEE ATTACHED A. DIRECTORS Chairman: _____ Address: _____ Vice Chairman: _____ Address: Director: _____ Address: _____ Director: Address: _____ B. OFFICERS President: ______ Address: _____ Vice President: _____ Address: _____

Address:

| , , | Troosuror: |
|------------|---|
| | Addross: |
| NOTE: If n | ecessary, you may attach an addendum to the application listing additional officers tors. |
| (Signatur | of Chairman, Vice Chairman, or any officer listed in number 12 of the application) |
| 14. N | printed name and capacity of person signing application) |

__(FLA__2189)_

AUTULIL INC.

State of Florida

Attachment to Application by Foreign Corporation ______for Authorization to Transact Business _____

Directors

| Name | Mailing Address |
|----------------------|--|
| James L. LePorte III | 25101 Chagrin Boulevard Beachwood, Ohio 44122 |
| John C. Martin III | 25101 Chagrin Boulevard Beachwood, Ohio 44122 |
| Robert A. Youdelman | 25101 Chagrin Boulevard Beachwood, Ohio 44122 |

Officers

| <u>Name</u> | <u>Title</u> | Mailing Address |
|----------------------|---|--|
| Robert G. Paul | President | 25101 Chagrin Boulevard Beachwood, Ohio 44122 |
| James L. LePorte III | Vice President and Controller | 25101 Chagrin Boulevard Beachwood, Ohio 44122 |
| McDara P. Folan III | Vice President and Secretary | 25101 Chagrin Boulevard Beachwood, Ohio 44122 |
| John C. Martin III | Vice President and Treasurer | 25101 Chagrin Boulevard Beachwood, Ohio 44122 |
| Robert A. Youdelman | Vice President and Assistant Secretary | 25101 Chagrin Boulevard Beachwood, Ohio 44122 |

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AHTP II, 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 TWENTY-FIFTH DAY OF AUGUST, A.D. 1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

FIELD ALVESTATE

SECRETARY OF STATE

SECRETARY OF FIELD

F

Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE:

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08-25-95