F95000005693

TODD A. STERZOY Holland and Knight	
(Requestor's Name) 315 South Calhoun Street Sulte 600	
Tallahassoc, Florida 32302	OFFICE USE ONLY
(City, State, Zip) (Phone #)	OFFICE USE CIVILY

CORPORATION NA	AME(s) & DOCUMENT NUM	BER(S) (if known):	5-22864
1. Autoland I	TAP Inc	7 4 (/	,- 22001
(Corp.	oration Name)	(Document #)	· · · · · · · · · · · · · · · · · · ·
2.	ration Name)		 _
3.	ingon Namo)	(Document #}	
(Corpo	ration Name)	(Document #)	
4	ration Name)	(Document #)	
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Mail out	Will wait Photocopy	Certificate of Status	RECE 95 NW 20
NEW FILINGS	AMENDMENTS	- 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CEIVED
Profit	Amendment		
NonProfit	Resignation of R.A., Officer/	Director	6. E
Limited Liability	Change of Registered Agent) ,
Domestication	Dissolution/Withdrawal		9/11/
Other	Merger		95 HOV 21
	DEGISTE ATTOM		AON
OTHER FILINGS	REGISTRATION/ QUALIFICATION		
Annual Report	X Foreign		P
Fictitious Name	Limited Partnership		OR A
Name Reservation	Reinstatement		CORPORATIONS
	Trademark		
	Other	Examiner'	s Initials

CR2E031(10/92)

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. AutoLend IAP, Inc.	
(Name of corporation: must include the word INCORPORATED, COMPANY, CORPORATION of like import in language as will clearly indicate that it is a corporation instead of or partnership if not so contained in the name at present.)	N" or words or a natural person
2. Delaware	
2. De laware (State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (FEI number, if applicable)	
4Dec., 16, 1994 B. Bennetter 1	
4. Dec., 16, 1994 5. Perpetual (Duration: Year corp. will cease to exist or	Same and the
6 June 1, 1995	Pathamat 1
6	95 855
7. 420 Jefferson Avenue	至 驷
Miami Beach, FL 33139	72 强温
(Current mailing address)	PHOP
	51, <u>21,</u>
8. Extension of Credit to Used Car Dealers	1:0
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of	f Florida)
9. Name and street address of Florida registered agent:	
Name: Helen Porter	
Office Address: 420 Jefferson Avenue	
Miami Beach Florida , 331	20
(Zip	Code)
10. Registered agent's acceptance:	
Having been named as registered asset and a	
Having been named as registered agent and to accept service of process for the corporation at the place designated in this application, I hereby accept the appreciation agent and agree to act in this capacity, I further acres to accept the appreciation of the company of the c	pointment as
of all statutes relative to the proper and complete to comply win to	he provisions
with and accept the obligations of my position as registered agent.	i airi iairiillar
1121	
(Registered agent's signature)	
neien Porter	
11. Attached is a certificate of existence duly authenticated, not more than 90 delivery of this application to the Department of State, by the Source of State.	davs prior to
delivery of this application to the Department of State, by the Secretary of State or having custody of corporate records in the jurisdiction under the interest of State or	other official

having custody of corporate records in the jurisdiction under the law of which it is incorporated.

A. DIRECTORS

	Chairman:	Steven Simon
	Addrass:	420 Jefferson Avenue
		Miami Beach, FL 33139
	Moa Chai	rman:
	Director: _	
	Director: _	
	•	
	OFFICERS	
Chief Financial	Officer/President:	Charley Pond
	Address: _	420 Jofferson Avenue
Ohior	_	Miami Beach, Rt. 32120
Executive	Officer Mce President	dent: Steven Simon
	Address: _	420 Jefferson Avenue
Chief		Miami Beach, FL 33139
	Officer/Secretary:	Helen Porter
	Address:	420 Jefferson Avenue
		Miami Beach, FL 33139
	Treasurer:	

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

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

14. Helen Porter/Chief Operations Officer/Secretary (Typed or printed name and capacity of person signing application)

95 KDY 21 PK 1:01

DIVISION OF CORPORATION

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AUTOLEND IAP, 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 SIXTEENTH DAY OF NOVEMBER, A.D. 1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

DIVISION OF CORPORATIONS
95 NOV 21 PM 1:01



Edward J. Freel, Secretary of State

AUTHENTICATION-

7714606

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2462264 8300

DATE.

11-16-95