# F960000000222

## **COURIER ADDRESS:**

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

#### **MAILING ADDRESS:**

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 1, 1995

DANA F. PHILLIPS UNITED NATIONAL LEASING, INC. 331 OAK DR S. GREEN COVE SPRINGS, FL 32043

SUBJECT: UNITED NATIONAL LEASING, INC.

Ref. Number: W95000021672

We have received your document for UNITED NATIONAL LEASING, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$3600.00.

Enclosed please find a copy of section 607.1501 or 617.1501, Florida Statutes, Enclosed please find a copy of section 607.1501 or 617.1501, Florida Statutes, which lists those activities that do not constitute transacting business or conducting affairs in this state. If after reviewing this section you determine erroneous information was inserted on the application, a sworn affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business or conducting its affairs in Florida prior to the year the application was submitted did not constitute transacting business or the year the application was submitted did not constitute transacting business or conducting affairs pursuant to section 607.1501 or 617.1501, Florida Statutes.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (904) 487-6093.

Freta Lott Corporate Specialist Supervisor

Letter Number: 395A00048817

1-8-96

Attn:Freda,Lott Secretary of State Qualifications/ Tax Lein Section Div. of Corporations P.O. Box 6327 Tallahassee, Fa. 32314

I do hereby affirm that the date first transacted business (5-92) listed in our application by Foreign corp. was listed in error. We have been transactions business through an independent contractor in Atlanta, Ga. The actual date should have been 1-1-96.

Dana F. Phillips

President

United National Leasing

331 Oak Dr. S.

Green Cove Springs, F1. 32043

(904)284-1004

KAREN L. SISTAME MY COMMISSION # 00 502219 EXPIRES: October 22, 1989 Bonded Thru Notary Plade Underwitten

# 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. (Name of corporation; must include the word "INCORPORATED", "COMPANY"/"GORPORATION" 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. Georgia (State or country under the law of which it is incorporated)  3. (FEI number, if applicable)
4. (Date of Incorporation)  5. Det De + Wa (Duration; Year corp., will cease to exist or "perpetual")  6. 5.92
6. 5.92 (Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.) 7. 3310akDTS
GTERN COVE STOS F132043 (Quirent mailing address)
8. Sell Selvice ( Doed ( Tout + The Equi) (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)  9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT)
Name: Dana F. Phillips
Office Address: 3310ak DrS 55 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
10. Registered agent's acceptance: (Zip Code)
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.
(Registered agent's signature)
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: (Street address ONLY-P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O . Box NOT acceptable) Chairman: Address: Vice Chairman: Address: \_\_\_\_\_ Director: Address: Director: Address: B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: Address: Vice President: Address: \_\_\_\_\_ Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 13. Vice Chairman, or any officer listed in number 12 of the application)

(Typed or printed name and capacity of person signing application)

# Pecretary of State Business Information and Services Suite 315, West Comer 2 Martin Luther King Ir. Dr. Atlanta, Georgia 30334-1530

DOCKET NUMBER : 953550039
CONTROL NUMBER : 8713676
DATE INC/AUTH/FILED: 06/01/1987
JURISDICTION : GEORGIA
PRINT DATE : 12/21/1995
FORM NUMBER : 211

DANA PHILLIPS/UNITED NATIONAL LEASING 331 OAK DRIVE SOUTH GREEN COVE SPRINGS FL 32043

### CERTIFICATE OF EXISTENCE

I, MAX CLELAND, Secretary of S ate of the State of Georgia, do hereby certify under the seal of my office that

# UNITED NATIONAL LEASING, INC. A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation, or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up, or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

MAX CLELAND SECRETARY OF

FILED
96 JAH 12 PHI2: 57
ECRETARY CH STATE
LLAHASSEE, HORIDA



CORPORATIONS 656-2817 CORPORATIONS HOT LINE 404-656-2222 Outside Metro-Atlanta