

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 JUN 30 AM 8:54

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # F96000003316

1. Corporation Name

Western Star Finance, Inc.

2. Principal Office Address

1 CIT Drive

Suite, Apt. #, etc.

City & State

Livingston, NJ

Zip

07039

Country

U.S.A.

3. Mailing Office Address

1 CIT Drive

Suite, Apt. #, etc.

Mailstop 1320-1

City & State

Livingston, NJ

Zip

07039

Country

U.S.A.

REINSTATEMENT 02-04

02-04

4. Date Incorporated or Qualified
To Do Business in Florida

06/28/1996

5. FEI Number

35-1979785

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

C T Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State
FL

Zip Code
33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

[Signature]

Jill E. Kranz

Assistant Secretary

Date

5/4/04

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Director	Thomas L. Abbate	1 CIT Drive	Livingston, NJ 07039
D, T	Glenn A. Votek	1 CIT Drive	Livingston, NJ 07039
D, EVP	Robert J. Ingato	1 CIT Drive	Livingston, NJ 07039
SVP, S	Eric S. Mandelbaum	1 CIT Drive	Livingston, NJ 07039
AS	Linda M. Seufert	1 CIT Drive	Livingston, NJ 07039
P	Roy W. Keller	1540 W. Fountainhead Parkway	Tempe, AZ 85282

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

[Signature]

Eric S. Mandelbaum, SVP

4/30/2004

(973) 740-5796

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #