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TO: Qualification/Tax Lien Section Division of Corporations

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SUBJECT: AUTOLINERS INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

A. J. STRETZ, PRESIDENT	SS PRESE 41
(Name of Person)	— 88 M
AUTOLINERS INC.	OF COLUMN
(Firm/Company)	
500 N. BROADWAY - JERICHO ATRIUM) 9: 55 State
(Address)	
TERICHO N.Y. 11753	
JERICHO, N.Y. 11753 (City/State/Zip)	

Should you need to call someone concerning this matter, please call:

A. J. STRETZ at (516) 935-1600 (Area Code & Daytime Telephone Number)

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

: 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:

ι.	AUTOLINERS INC.				_
	(Name of corporation: must include words or abbreviations of like imponatural person or partnership if not	act in Innounce as Will clea	irly indicate that it is a corp	RPORATION" or	
	1				
2.	NEW YORK STATE	3.	13-2733940		
	(State or country under the law of v	which it is incorporated)	(FEI number, if a	pplicable)	
4.	JANUARY 2, 1973		DERPETUAL (Duration: Year corp. w	dil ganea to aviet pe	-
	(Date of Incorporation)		"perpetual")	c	2
			• •	99	- <u>(</u> 2)
<u>.</u>	SEPTEMBER 1, 1996			SE SE	ĒĢ.
6.	(Date first transacted business	in Florida. (SEE SECTIONS	607.1501, 607.1502, AND	117.155, F.S.)	
_	500 N. BROADWAY	JERICHO ATRIU		ယ	중직은
7.	Joo N. BRONDINI	0.37(2.01)			5 00
				က်	بۇرى كۇچا
	JERICHO, N.Y. 1	. 1753 (Current mailing	nddrass)	ഗ	급해
		(Current maning	uuu(css)	01	in in
	annum on nonntall	COMPANCIAL COMP	a atv		
8.	AGENT OF FOREIGN (Purpose(s) of corporation author	STEARISHEP CORP	ntry to be carried out in the	state of Florida)	
	(, -, - , - , - , - , - , - , - , - , -		•		
9.	Name and street address of acceptable)	Florida registered a	gent: (P.O. Box or Ma	ail Drop Box <u>NO</u>	<u>T</u>
9.	Name and street address of acceptable) Name: LARRY		gent: (P.O. Box or Ma	ail Drop Box <u>NO</u>	<u>T</u>
9.	acceptable) Name: LARRY	WARREN .		ail Drop Box <u>NO</u>	<u>T</u>
9.	acceptable) Name: LARRY	WARREN 9620 DAVE RAWL!	s BLVD.	nil Drop Box <u>NO</u>	<u>T</u>
9.	Name: LARRY Office Address:	9620 DAVE RAWLE	S BLVD. TERMINAL	22226	<u>T</u>
9.	Name: LARRY Office Address:	WARREN 9620 DAVE RAWL!	s BLVD.	32226	<u>T</u>
	Name: LARRY Office Address:	WARREN 9620 DAVE RAWLE BLOUNT ISLAND SONVILLE	S BLVD. TERMINAL	22226	<u>T</u>
1(C re al an	Acks	BLOUNT ISLAND SONVILLE ance: ered agent and to accessed in this applied in this applied in this applied in this applied in this capacity. It is a property position as registered agent existence duly authentic the Department of Section 1985.	S BLVD. TERMINAL , Florida, ccept service of proce fication, I hereby acce further agree to comp formance of my duties, ed agent. s signature) ticated, not more than 9 State, by the Secretary	32226 (Zip Code) ss for the above of the appoint the appoint the provision and I am familiate of State or other	stated nent as sions of ar with

A. DIRECTORS (Street address only- P. O . Box NOT acceptable) Chairman: OIVIND O. LARSEN Address: DRONNINGENSGATE 40 0154 OSLO 1 NORWAY Vice Chairman: KARL KR. HAUGER Address: __DRONNINGENSGATE 40 0154 OSLO 1 NORWAY Director: ALFRED J. STRETZ Address: 387 LANDING AVE. SMITHTOWN, N.Y. 11787 Director: JAMES E. BUTCHER Address: __27_M1LL_DAM_ROAD__ SMITHTOWN, N.Y. 11787 B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: _ALFRED J. STRETZ Address: 387 LANDING AVE. SMITHTOWN, N.Y. 11787 Address: 27 MILL DAM ROAD SMITHTOWN, N.Y. 11787 Secretary: JAMES E. BUTCHER Address: 27 MILL DAM ROAD SMITHTOWN, N.Y. 11787 Treasurer: ______ Address: ___ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) PRESIDENT A. J. STRETZ

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

State of New York Department of State

I hereby certify, that the certificate of incorporation of AUTOLINERS, INC. was filed on 01/02/1973, with perpetual duration, and that a diligent examination has been made of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

The Corporation Biennial Statement is past due.

Witness my hand and the official seal of the Department of State at the City of Albany, this 27th day of August one thousand nine hundred and

ninety-six.

Special Deputy Secretary of State

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