

REFERENCE

11,7168 \_\_\_ 157716A

AUTHORIZATION

COST LIMIT

\$ 70.00

ORDER DATE: October 10, 1996

ORDER TIME :

10:33 AM

000001982020-

ORDER YO. :

117168-025

CUSTOMER NO:

157716A

CUSTOMER:

Jean M. Huguenel, Legal Asst

At&t Capital Corp. 44 Whippany Road

Morristown, NJ 07962

## FOREIGN FILINGS

NAME:

ANTIGUA FUNDING CORPORATION

XXXX QUALIFICATION

(TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Danny G. Smith

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607, I 503. FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

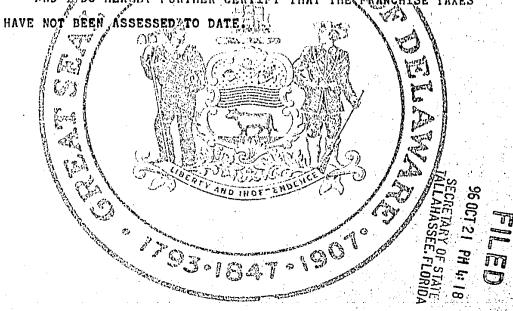
۱.	ANTIGUA FUNDING CORPORATION				
•	Name of corporation: must include the word "INCORPOR- words or abbreviations of like import in language as will cle natural person or partnership if not so contained in the name	ATED arly in e at pr	o", "COMPANY","CO ndicate that it is a corp resent.)	RPORATION" or	
,	Delaware	22	-3462 924		
٠.	(State or country under the law of which it is incorporated)	·	(FEI number, if a	ipplicable)	
1,		J.	Perpetual	· · · · · · · · · · · · · · · · · · ·	
	(Date of Incorporation)	<u> </u>	Duration: Year corp. v "perpetual")	vill cease to exist or	
ς.	Upon qualification				
٠,	(Date first transacted business in Florida. (SEE SECTIONS	s 607.	1501, 607.1502, AND		<u> </u>
7.	44 Whippany Rd. Morristown, New Jersey	179	62	LECK FECK	D N N
				ETAR HASS	
	(Current mailing	addre	ess)	tho -	
2	To engage in any lawful act or activity			FLOREST	
Э.	(Purpose(s) of corporation authorized in home state or cou	intry to	o be carried out in the	state of Forida)	
€.	Name and street address of Fiorida registered a acceptable)	agent	t: (P.O. Box or M	ail Drop Box <u>N</u>	<b>I</b>
	· Name: Corporation Service Comp	any			
	Office Address: 1201 Hays Street				
	Tallahassee		, Florida .	32301	
		<del></del>	, Florida,	(Zip Code)	<del>-</del>
lC	Registered agent's acceptance:				
co re ali an	aving been named as registered agent and to accept the place designated in this application at the place designated in this application and agree to act in this capacity. It is tatutes relative to the proper and complete performance of my position as registered accept the obligations of my position as registered agent.  By:  (Registered agent)	ication formation formation formation formation for format	on, I hereby accompance of my duties, sent.  ASS (V)	ept the appoint ly with the prov and I am famil	ment as isions of
1	. Attached is a certificate of existence duly authendelivery of this application to the Department of S	ticate	ed, not more than?	00 days prior to	

12.	Names and addresses of NOT acceptable)	officers and/	or directors:	(Street	address ON	LY- P	O.	Box
. – .	NOT acceptable)			•	20 O V			

A. DIREC	CTORS (Street address only- P. O . Box NOT acceptable)	
		PE SS
Address:		AH B
_		2 SS
— Vice Chairn	man:	(H)
		<u> </u>
1441400		8
 Director:	Guy Hands	
	Colne House 89 Kippington Rd. Sevenoaks Kent TW132LW, En	gland
 Director:	Jeff Nash	
Address:	The Coach HOuse, St. Matthews Rd. Ealing, London W53JT E	ngland
B. OFFIC	CERS (Street address only- P. O. Box NOT acceptable)	
	Guy Hands	
	Colne House 89 Hippington Rd. Sevenoaks Kent TW132LW, I	ingland
Address: _		
— Vice Dessid	dent: Jeff Nash	
	The Coach House, St. Matthews Rd. Ealing, London W53JT	England
Address: _		
_	James Elton	
Secretary:	44 Whippany Rd. Morristown, New Jersey 07962	
Address: _		
· · · · -	Jeff Nash	
Treasurer:	The Coach House, St. Matthews Rd. Ealing, London W53J	T England
Address: _		
_		
NOTE: If	f necessary, you may attach an addendum to the application listing addordirectors.	ditional
~		
13.	Jam busin	lication)
	Charles of Chairman Vine Chairman of any officer litted in himber 12 of the ann	IILAUUIII
(Si	ignature of Chairman, Vice Chairman, or any officer listed in number 12 of the app	

## State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ANTIQUA FUNDING CORPORATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS OCTOBER,



AUTHENTICATION:

8146999

DATE:

10-15-96

2644577 8300

960299325