# F98000005283

To: Qualif Divîsio	ication/Tax Lien Section on of Corporations
SUBJECT:	Nolat Premium Finance Corporation
<del></del>	(Name of corporation - must include suffix)
Dear Sir or Ma	dam: 8000025443581 -09/21/9801054005
The enclosed "Certificate of to transact business."	Application by Foreign Corporation for Authorization to Transact Business in Florida", Existence", and check are submitted to register the above referenced for
Please return al	l correspondence concerning this matter to the following:
	Carol A. Wojcicki, Paralegal
	(Name of Person)
	Automated Installment Systems
	(Firm/Company)
	955 Executive Parkway, Suite 201
	(Address)
	St. Louis, MO 63141
	(City/State/Zip)
Should you need	to call someone concerning this matter, please call:
Carol W	at ( 014 ) 370-0007
(Name o	of Person) (Area Code & Daytime Telephone Number)

#### STREET ADDRESS:

Qualification/Tax Lien Section 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

## Automated Installment Systems

September 17, 1998



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

Dear Sir or Madam:

Enclosed please find the following for Nolat Premium Finance Corporation for authorization to do business in Florida:

- 1. Transmittal Letter
- Original and copy of Application by Foreign Corporation for Authorization to Transact Business in Florida
- 3. Certificate of Existence with Status in Good Standing from Nevada
- 4. Check in the amount of \$70.00 for registration fee, \$8.75 for Certificate of Status and \$52.50 for certified copy

Please return filed copy to my attention: Carol A. Wojcicki at the address below. If you need anything further, please advise.

Sincerely,

Carol A. Wojcicki

Paralegal

DIVISION OF CHAPPINATIONS
98 SEP 21 PH 1: 43

Home Office:

955 Executive Pkwy., Suite 201 St. Louis, Missouri 63141 314 576 0007

Toli Free 1 800 624 6308 Fax No. 314 878 7843 California Office:

2100 E. Katella Ave., Suite 220 Anaheim, California 92806

714 978 2268

Toll Free 1 800 548 6529

Fax No. 714 978 6996

## 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.

KŁ	Nolat Premium Finance Corporation	
1.	(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" 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.	Nevada 3. 43-1750997	
۷.	(State or country under the law of which it is incorporated) (FEI number, it applicable)	
4.	Date of incorporation)  5. perpetual  (Duration: Year corp. will cease to existor "perpetual")	
	(Date of incorporation) (Duration: Tear corp. will cease to exist of people and	
6	N/A	
Ο.	(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
	955 Executive Parkway, Suite 201, St. Louis, MO 63141	7
7.	98	S
		EC
	(Current mailing address)	ř.
		Ř <u>∓</u>
8	3. Insurance Premium Financing	Y.E.
	(Purpose(s) of cornoration authorized in nome state of country to be stated	ن باب
ç	9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	7 A
	Name: CT Corporation System	
	Office Address: 1200 South Pine Island Rd.	_
•	011100 11001001	. =
	Plantation , Florida, 33324 (Zip code)	
	(Zip code)	
	10. Registered agent's acceptance:	
	Having been named as registered agent and to accept service of process for the above stated corporation at the place designous theorem and the place designous transferred agent and agree to act in this capacity. I further agree to con	sted in
	Having been named as registered agent and to accept service of process for the accordance to act in this capacity. I further agree to con this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to conthis application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to conthis application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to contain a positive performance of my duties, and I am familiar with and of the application agent	ıply
	with the provisions of all statutes relative to the proper and complete performance of my	иссері
	Ala alliantions of my notinon as registered agent.	
	See a Hacked	
	(Registered agent's signature)	
	then 90 days prior to delivery of this application to the	
	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

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

which it is incorporated.

A. DIRECT	TORS (Street address only - P.O. Box NOT acceptable)	
Chairman: _	Dietmar Schmidt-Wenzel	
Address:	940 Calle Amanecer No. C	
	San Clemente, CA 92673	
Vice Chairm	man: Wolfgang D. Daniel	
Address:	5250 Neil Road, Suite 210	
	Reno, NV 89502	
Director: _		
Address: _		
_		<u> </u>
Director: _		
Address: _		
~ ~~~	CTIPG (Ct., et a Livers only D.O. Poy NOT accentable)	2
B. OFFIC	CERS (Street address only - P.O. Box NOT acceptable)	SE
President:	·	<u> </u>
Address: _	940 Calle Amanecer No. C	<u> </u>
_	San Clemente, CA 92673	<u> </u>
Vice Presid	dent: & S	o i
Address: _	<b>3</b> 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	i 
_		<del> </del>
Secretary:	Wolfgang D. Daniel	
Address:	5250 Neil Road, Suite 210	
	Reno, NV 89502	
Treasurer:	Dietmar Schmidt-Wenzel	
Address: _	940 Calle Amanecer No. C	
-	San Clemente, CA 92673	
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
13	V. Teruniga.	<del></del>
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
14	Dietmar Schmidt-Wenzel, President	<del></del>
	(Typed or printed name and capacity of person signing application)	

#### ACCEPTANCE OF APPOINTMENT

### **RE:** Nolat Premium Finance Corporation

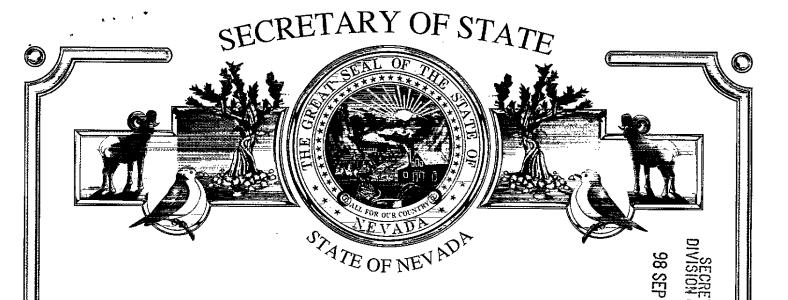
Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

Dated: August 31, 1998

C T CORPORATION SYSTEM

M. S. Green,

Assistant Secretary



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **NOLAT PREMIUM FINANCE CORPORATION**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since July 30, 1996, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on September 10, 1998.

Secretary of State

Ву

Certification Clerk