

F9900002287

CAPITAL CONNECTION INC.
417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302
(850) 224-8879 • 1-800-442-8062 • Fax (850) 222-1222

Ryan Automotive Management Services Inc.

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-05/03/99--01092--006
*****70.00 *****70.00

w99-10264

99 MAY -3 PM 12:02
DIVISION OF CORPORATION

☐ Art of Inc. File
☐ LTD Partnership File
☒ Foreign Corp. File Photo
☐ L.C. File
☐ Fictitious Name File
☐ Trade/Service Mark
☐ Merger File
☐ Art. of Amend. File
☐ RA Resignation
☐ Dissolution / Withdrawal
☐ Annual Report / Reinstatement
☐ Cert. Copy
☒ Photo Copy
☐ Certificate of Good Standing
☐ Certificate of Status
☐ Certificate of Fictitious Name
☐ Corp Record Search
☐ Officer Search
☐ Fictitious Search
☐ Fictitious Owner Search
☐ Vehicle Search
☐ Driving Record
☐ UCC 1 or 3 File
☐ UCC 11 Search
☐ UCC 11 Retrieval
☐ Courier

FILED
99 MAY -4 AM 10:32
SECRETARY OF STATE
TALLAHASSEE FLORIDA

W
5/4

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

CD \$-399 11:00



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

RECEIVED

99 MAY -3 PM 3:34

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

May 3, 1999

CAPITAL CONNECTION, INC.
ATTN: CD

SUBJECT: RYAN AUTOMOTIVE MANAGEMENT SERVICES, INC.
Ref. Number: W99000010264

We have received your document for RYAN AUTOMOTIVE MANAGEMENT SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

A brief description of the entity's nature of business must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers
Document Specialist

Letter Number: 399A00023624

Corrected



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

May 3, 1999

CAPITAL CONNECTION, INC.
ATTN: CD

SUBJECT: RYAN AUTOMOTIVE MANAGEMENT SERVICES, INC.
Ref. Number: W99000010264

We have received your document for RYAN AUTOMOTIVE MANAGEMENT SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Although you corrected lines 3 and 6, line 8 is still blank. Please see the attached copy of our previous letter.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers
Document Specialist

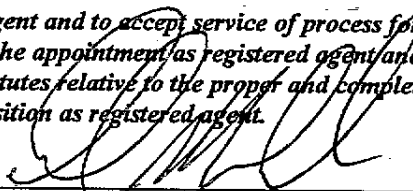
Letter Number: 599A00023699

Corrected

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99 MAY -4 AM 9:43
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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. Ryan Automotive Management Services, Inc.
(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. Delaware
(State or country under the law of which it is incorporated)
3. Applied for
(FEI number, if applicable)
4. April 15, 1999
(Date of incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. Upon approval of this application
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 7424 Pulsar Street
New Port Richey, FL 34652
(Current mailing address)
8. Automotive Management
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)
Name: CorpAmerica, Inc.
Office Address: 1525 South Andrews Avenue, Suite 216
Ft. Lauderdale, Florida, 33316
(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 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)

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99 MAY -4 AM 10:28
TALLAHASSEE FL 32301
SECRETARY OF STATE

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Herbert Stephen Ryan

Address: 7424 Pulsar Street, New Port Richey, FL 34652

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: Herbert Stephen Ryan

Address: 7424 Pulsar Street, New Port Richey, FL 34652

Vice President: _____

Address: _____

Secretary: Herbert Stephen Ryan

Address: 7424 Pulsar Street, New Port Richey, FL 34652

Treasurer: Herbert Stephen Ryan

Address: 7424 Pulsar Street, New Port Richey, FL 34652

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Herbert Stephen Ryan - President

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

State of Delaware
Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RYAN AUTOMOTIVE MANAGEMENT SERVICES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF APRIL, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RYAN AUTOMOTIVE MANAGEMENT SERVICES, INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF APRIL, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

FILED
99 MAY -4 AM 10:32
SECRETARY OF STATE
TALLAHASSEE FLORIDA



3030511 8300

991160170

Edward J. Freel
Edward J. Freel, Secretary of State

9703814

AUTHENTICATION:

04-23-99

DATE: