

F99000002536

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: WOLFE AUTO LEASE USA INC
(Proposed corporate name - must include suffix)

000002879010--3
-05/18/99--01065--001
*****157.50 *****78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

☐ \$70.00 Filing Fee
☐ \$78.75 Filing Fee
& Certificate of Status

☒ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: CHARLES LASLEY
Name (Printed or typed)

PO Box 5475
Address

ST. AUGUSTINE FL 32085
City, State & Zip

904 333 4188
Daytime Telephone number

99 MAY 18 PM 1:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

5/18/99

NOTE: Please provide the original and one copy of the articles.

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.

- X1. WOLFE AUTO LEASE USA 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.)
- X2. WASHINGTON X3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
- X4. DEC 13, 1994 X5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. MAY 3, 1999
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 7405 SOUTH 212th ST., UNIT #134
KENT, WASHINGTON 98032
(Current mailing address)
8. AUTOMOTIVE TRANSACTIONS
(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: CHARLE LASKEY
Office Address: 304 GENDA RD
ST. AUGUSTINE, Florida, 32085
(Zip code)

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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.

[Signature]
(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)

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

Chairman: GORDON WOLFE
 Address: 4356 ROSS CRESCENT
WEST VANC. BC V7W-1B2 (BRITISH COLUMBIA)
 Vice Chairman: MICHAEL HACQUARD
 Address: 1918 128A ST.
SURREY, BC, CANADA (BRITISH COLUMBIA) POSTAL V6T-3P6
 Director: _____
 Address: _____
 Director: _____
 Address: _____

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

President: GORDON WOLFE
 Address: 4356 ROSS CRESCENT
WEST VANCOUVER, BC V7W-1B2 (BRITISH COLUMBIA)
 Vice President: MICHAEL HACQUARD
 Address: 1918 128A ST.
SURREY, BC, CANADA (BRITISH COLUMBIA) POSTAL V6T-3P6
 Secretary: _____
 Address: _____
 Treasurer: _____
 Address: _____

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

13. [Signature]
 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
 14. MICHAEL HACQUARD (VP)
 (Typed or printed name and capacity of person signing application)

STATE of WASHINGTON



SECRETARY of STATE

I, RALPH MUNRO, Secretary of State of the State of Washington and custodian of its seal,
hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION

OF

WOLFE AUTO LEASE USA, INC.

I FURTHER CERTIFY that the records on file in this office show that the
above named profit corporation was formed under the laws of the
State of Washington and was issued a Certificate of Incorporation
in Washington on December 13, 1994.

I FURTHER CERTIFY that as of the date of this certificate, no Articles of Dissolution
have been filed, and that the corporation is duly authorized to
transact business in the corporate form in the State of Washington.



Date: May 10, 1999

Given under my hand and the Seal of the State
of Washington at Olympia, the State Capital

SMos

Ralph Munro, Secretary of State

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA