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| (Requ | estor's Name) | | | |
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| (City/S | State/Zip/Phone #) | | | |
| PICK-UP | WAIT MAIL | | | |
| (Busir | ness Entity Name) | | | |
| (Docu | ment Number) | | | |
| Certified Copies | Certificates of Status | | | |
| | Ast | | | |
| Special Instructions to Fili | ing Officer: | | | |
| Office Use Only | | | | |



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05 MAY 26 AN II: 13





ACCOUNT NO. : 072100000032

REFERENCE :

4370691

AUTHORIZATION

COST LIMIT : \$ 125.00

ORDER DATE: May 26, 2005

ORDER TIME : 10:25 AM

ORDER NO. : 394345-005

CUSTOMER NO: 4370691

CUSTOMER: Ms Sally Boren

General Parts, Inc 2635 Millbrook Road

Raleigh, NC 27604

FOREIGN FILINGS

NAME: 2005 II LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

__ PLAIN STAMPED COPY

__ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan -- EXT# 2955

EXAMINER:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| IN C FOR | COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES LEIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSII | S, TH VESS | 'E FOLLOWING IS SUBMITTED TO REGIS | TER A |
|--------------|--|--------------------|--|--|
| 1 | 2005 II LLC | | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| 1. | (Name of Foreign Lin | Liability Company) | 2 /4. 3 /8 | |
| | · · | | <i>y</i> , | |
| 2. | | 3. | applied for | 7 |
| | (Jurisdiction under the law of which foreign limited liability company is organized) | | (FEI number, if applicable) |) |
| 4. | February 25, 2005 | 5. | perpetual | <u> </u> |
| | (Date of Organization) | | (Duration: Year limited liability company wor "perpetual") | vill cease to exist |
| 6. | | | | |
| | (Date first transacted business (See sections 608.501 & 608.50 | in Fl 2 F.S | lorida, if prior to registration.) to determine penalty liability) | |
| 7. | 2635 E. Millbrook Road | | | <u> </u> |
| | Raleigh, NC 27604 | | and the state of t | <u>. </u> |
| | (Street Address | of P | rincipal Office) | |
| 8. | If limited liability company is a manager-managed c | omp | oany, check here X | |
| 9. | The name and usual business address of the managir | ng m | lembers or managers are as follows: | |
| | | | | |
| | Thomas B. Hines | <u> </u> | | |
| | 2635 E. Millbrook Road, Raleigh, NC | 27 | 7604 | · Kusawa |
| | | | | |
| hav If tl | Attached is an original certificate of existence, no ming custody of records in the jurisdiction under the law ne certificate is in a foreign language, a translation mitted.) | ofv | which it is organized. (A photocopy is r | not acceptable. |
| 11. | Nature of business or purposes to be conducted or pr | rome | oted in Florida: | |
| | Own and manage real estate | | | / · · · · |
| | In Portini | | | |
| | Signature of a member of an author (In accordance with section 608.408(3), F.S., an affirmation under the penalties of perjury to | the ex | secution of this document constitutes | |
| | Thomas B. Hines | | | - |
| | Typed or printed | nan | ne of signee | |

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| 2. The name and | the Florida street address of th | ne registered agent and office are: | |
|-------------------|--|--|---------------------------------------|
| | Corporation Service | Comapny | |
| | # | (Name) | |
| | | | |
| | 1201 Hays Street | | _ |
| | _ | | |
| | Tallahassee | FL 32301 | |
| | | City/State/Zip | |
| | | | |
| company at the pa | lace designated in this certifica is capacity. I further agree to c | accept service of process for the above stated ate, I hereby accept the appointment as regist comply with the provisions of all statutes rela- tom familiar with and accept the obligations o | tered agent and ting to the proper |

Cynthia L. Harris
as its agent
(Signature)

registered agent as provided for in Chapter 608, Florida Statutes.

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

Delaware

PAGE

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "2005 II LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF MAY, A.D. 2005.



Warriet Smith Windson Secretary of State

AUTHENTICATION: 3899015

DATE: 05-23-05

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