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(Requestor's Name) SECRETA	RY OF STATE
(Address) (Address)	200067454732
(City/State/Zip/Phone #)	— በ3/ነብ/ብઠ ⊹ፀዘብላሉ ሰብ5 ★★ነማሲብጣ
(Business Entity Name)	-
(Document Number) Certified Copies Certificates of Status	-
Special Instructions to Filing Officer:	

Office Use Only

COVER LETTER

FILED

Registration Section TO: **Division of Corporations**

SUBJECT: AutoInq LLC

(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

	(Name of Person)
AutoInq LLC	
	(Firm/Company)
661 NE 195th Str	reet, #205 (Address)
Miami, Fl. 33179	
	(City/State and Zip Code)

Howard Weiss

at (347) 7312323

(Name of Person)

(Area Code & Daytime Telephone Number)

MAILING ADDRESS:

STREET ADDRESS:

Division of Corporations

Division of Corporations

P.O. Box 6327

Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

\$125.00 Filing Fee

☑ \$130.00 Filing Fee &

□\$155.00 Filing Fee & Certificate of Status Certified Copy

□\$160.00 Filing Fee, Certificate of Status & Certified Copy

' APPLICATION BY FOREIGN LIMITED LIAB	ILITY COMPANY FOR AUTHORIZATION TO
TRANSACT BUSI	NESS IN FLORIDA
IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTE	NESS IN FLORIDA S. THE FOLLOWING IS SUBMITTED TO PRESIDE A FOREIGN STATE OF FLORIDA: SECRETARY OF 5: 12
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE	STATE OF FLORIDA:
1	176 S O & UP O &
(Name of Foreign Limited Li	iability Company)
2. Delaware 3.	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4 January 9, 2006 5	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon Filing	
(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S.	rida, if prior to registration.) to determine penalty liability)
7. 661 NE 195th Street, #205 Miami, Fl. 33	179
(Street Address o	of Principal Office)
8. If limited liability company is a manager-managed of	company, check here
9. The name and usual business addresses of the mana	ging members or managers are as follows:
Howard Weiss: 661 NE 195th Street, #205	Miami Fl. 33179
10. Attached is an original certificate of existence, no more than 90 da	ays old, duly authenticated by the official having custody of records in
the jurisdiction under the law of which it is organized. (A photocopy	is not acceptable. If the certificate is in a foreign language, a
translation of the certificate under oath of the translator must be subm	itted.)
11. Nature of business or purposes to be conducted or	promoted in Florida: Automotive Marketing
- •	
	•
	horized representative of a member.
(In accordance with section 608.408(3), F.S an affirmation under the penalties of perjui	S., the execution of this document constitutes ry that the facts stated herein are true.)
Howa (1	· ·
Typed or printed	name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

FILED

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

AutoIng LL	3		
2. The name and	the Florida street address of t	he registered	d agent and office are:
		•	•
	Howard Weiss		
-		(Name)	
	661 NE 195th Street,	#205	
-	Florida Street Address	(P.O. Box <u>N</u>	OT ACCEPTABLE)
	Miami	174 Ç	33179
	IVIIAIIII	FI. C	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Signature)

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

Delaware

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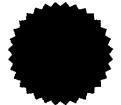
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AUTOINQ 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 SIXTH DAY OF MARCH, A.D. 2006.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AUTOINQ LLC" WAS FORMED ON THE NINTH DAY OF JANUARY, A.D. 2006.



Warriet Smith Hindson Harriet Smith Windson, Secretary of State

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AUTHENTICATION: 4570265

DATE: 03-06-06