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COVER LETTER

TO: Registration Section Division of Corporations	_		
SUBJECT: Autocraft Microsystems, LLC			
	ited Liability Company)		
	ability Company for Authorization to Transact Business in ubmitted to register the above referenced foreign limited		
Please return all correspondence concerning this n	natter to the following:		
Gayle L. Rice			
(Name of Person)			
Rogers Towers, P.A.			
·	rm/Company)		
1301 Riverplace Blvd.,	Suite 1500		
	(Address)		
Jacksonville, Florida 32	2207		
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Gayle L. Rice	at (_904) 346-5515		
(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: [2]\$125.00 Filing Fee	☐\$155.00 Filing Fee & ☐\$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy		

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Autocraft Microsystems, LLC (Name of Foreign Limited Liability Company) 2. Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 5. perpetual 4 November 9, 2005 (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") February 1, 2006 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 11555 Central Parkway, Ste. 603 Jacksonville, Florida 32224 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Autocraft Automotive Corporation 11555 Central Parkway, Ste. 603 Jacksonville, Florida 32224 10. Attached is an original certificate of existence, no more than 90 days 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 cortificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Engage in any activity for which a limited liability company may be organized in the State of Delaware Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Autocraft Automotive Corporation, Alexander P. Szlegr,

Typed or printed name of signee

President

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.

1. The name of the Limited Liability Company is:	
Autocraft Microsystems, LLC	
2. The name and the Florida street address of the registered agent and office are:	2006 MAR 21
Gayle L. Rice	老
(Name)	S. T.
1301 Riverplace Blvd., Ste. 1500	711
Florida Street Address (P.O. Box NOT ACCEPTABLE)	LOAIDA
Jacksonville FL 32207	
City/State/Zip	

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 "AUTOCRAFT MICROSYSTEMS, 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-FIRST DAY OF DECEMBER, A.D. 2005.

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





Warriet Smith Windson, Secretary of State

AUTHENTICATION: 4392933

DATE: 12-21-05

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