# Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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

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(Nar	ne of Foreign Limited Liability Com	pany; must include "Lir	E FOLLOWING IS SUBMITTED TO REGIS OF FLORIDA:  LC Inited Liability Company," "L.L.C.," or "LL Insacting business in Florida and attach a co ume. The ulternate name must include "Limi  Applied For  (FEI number, if applicable)  perpetual  ration: Year limited liability company will est or "perpetual")	C.")
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ompany,"	"LLC," "LLC.")			<u></u>
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company	is organized)	-		22
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	(Date of Organization)	<u>, (D</u>	ration: Year limited liability company will	cease to
		exi	ar or "berberrer)	3
upon fili				<u>:</u>
	(Date first transacted	business in Florida, if & 608.502 F.S. to dete	prior to registration.)	<u> </u>
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Alphare	tta, Georgia 30005			
		Street Address of Princ	ipal Office)	
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## 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:
InspectMyRide LLC
If unavailable, the alternate to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
C T Corporation System
(Name)
1200 South Pine Island Road
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Plantation PL, 33324
City/State/21p
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.  C T Corporation System  By:
(Signature)
Madonna Cuddihy Special Assistant Secretary 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 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INSPECTMYRIDE 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-EIGHTH DAY OF JULY, A.D. 2010.

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100778834

You may verify this cartificate online at corp.delaware.gov/anthwer.shtml

AUTHENTY CATION: 8138341

DATE: 07-28-10