Macoons 1

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(2.7,2
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100283505841

SUFFICIENCY OF FILING

16 KAR 21 PH 2:33 16 MAR 21 AM 9:37

SECRETARY OF STATE OF

MAR 22 2016 S. YOUNG CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 070257 4304766 AUTHORIZATION COST LIMIT ORDER DATE: March 18, 2016 ORDER TIME : 10:22 AM ORDER NO. : 070257-005 CUSTOMER NO: 4304766 FOREIGN FILINGS NAME: AUTO TAG OF AMERICA LLC Y XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

we, the undersigned, do hereby certify that I am the Authorized Person		
of Auto Tag of America LLC		
(Name of Limited Liability Company)		
a limited liability company duly organized and existing under the laws of		
Delaware	하	NIT SEC
(State or Country of Organization)	HAR 2	AH AH
Because the name of this foreign limited liability company does not satisfy the	63	1884 1884 1884
requirements of the s. 605.0112, F.S., the limited liability company hereby adopt	is the 🚊	E. FLO
following name to transact business in the state of Florida:	ಟ	
Auto Tag LLC		3 55
(Name to be used by limited liability company in Florida. NOTE: Name must contain Limited Liability Company, L.L.C., or LLC.)		
DJ. A J. 3/16/2016	<u> </u>	
Signature Authorized Person Date		

COVER LETTER

TO:

Registration Section

Div	ision of Corporatio	ns						
SUBJECT:	Auto Tag of Ameri	ca LLC						
Name of Limited Liability Company								
The enclosed Existence, an	l "Application by Fo	reign Limited Liability Comp ed to register the above refere	pany for Authorizatio	n to Tra liability	nsact Business in Florida," company to transact busine	Certificate of ess in Florida		
Please return	all correspondence	concerning this matter to the	following:					
	Mark J. DeVit	0						
	Name of Person							
	c/o Burns & L	evinson LLP						
	Firm/Company							
	125 Summer Street					SECONOMICS CONTRACTOR		
	Address							
•	Boston, MA 02110					CRETARY C		
		City/S	tate and Zip Code					
	mdevito@burns	lev.com				9 6		
		E-mail address: (to be used	d for future annual re	port not	fication)	二三元		
For further in	formation concerning	g this matter, please call:						
Ma	rk J. DeVito		617	345-367	73			
	Name (of Contact Person	Area Code	Day	lime Telephone Number			
Div Reg P.O	ILING ADDRESS: ision of Corporation istration Section Box 6327 ahassec, FL 32314		D R C 2	livision o egistrati lifton Bu 661 Exe	ADDRESS: of Corporations on Section ailding cutive Center Circle ce, FL 32301			
	check for the follow 125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	■ \$155.00 Filing Certified Copy	Fee &	□ \$160.00 Filing Fee, Ce of Status & Certified Cop			

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

, Auto Tag of America L	LC		
h .		de "Limited Liability Company," "L.E.C.," or "LI.C.	.")
Auto Tag LLC			
(If name unavailable, enter all Liability Company," "L.L.C,"	ternate name adopted for the purpose of trail or "LLC.")	nsacting business in Florida. The alternate name mus	t include "Limited
2. Delaware	3.	81-1170430	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4. Upon Qualification			
	(Date first transacted business in Figure (See sections 605,0904 & 605,0905, I		
5. 1150 N. Alma School I	•		
Mesa, AZ 85201			
	(Street Address of Principal	al Office)	
6. 1150 N. Alma School R	load		
Mesa, AZ 85201			(Charles
4 - All Control of the Control of th	(Mailing Address	5)	5 F.E.
7. Name and street addres	s of Florida registered agent: (P.O. Bo	x NOT acceptable)	5 FR
Name:	Corporation Service Company		ED SE
Office Address:	1201 Hays Street		T mc
	Tallahassee	Florida 32301	့် ရှိ
	(City)	(Zip code)	<u> </u>
designated in this applicate to complywith the provision	gistered agent and to accept service of tion, I hereby accept the appointment of ons of all statutes relutive to the proper my position as registered agent.	process for the above stated limited liability coas registered agent and agree to act in this caper and complete performance of my duties, and Courtney Courtney Asst. Vice	acity. I further agree I am familiar with and Williams
8. The name, title or capa	city and address of the person(s) who h	as/have authority to manage is/are:	
James D. Tuton, Chief Ex	ecutive Officer; David M. Roberts, Pre	sident & Chief Operating Officer;	
Adam R. Draizin, Executi	ve Vice President; Patricia D. Chiodo,	Chief Financial Officer; and Kristen A. Young,	
Secretary; each with a prin	ncipal office address of 1150 N. Alma S	School Road, Mesa, AZ 85201.	MANAGEMENT CONTRACTOR
jurisdiction under the law of the translator must be si	of which it shagarded, If the certification itself the certification is shadow of an a	duly authenticated by the official having customete is in a foreign language, a translation of the company of t	ertificate under outh
submitted in a document to	the Department of State constitutes a il	hird degree felony as provided for in s.817.155,	F.S.
	Kristen A. Young		

Typed or printed name of signee

<u>Delaware</u>

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "AUTO TAG OF AMERICA 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 JANUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AUTO TAG OF AMERICA LLC" WAS FORMED ON THE FOURTEENTH DAY OF JANUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

16 HAR 21

SECRETARY OF STATE

Authentication: 201707044

Date: 01-21-16

5936255 8300 SR# 20160327755