

10/10/2019

Division of Corporations

Florida Department of State

Division of Corporations

Public Information

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

FILED
2019 OCT 10 PM 4:45
TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**Foreign Limited Liability Company
UAG Kissimmee Motors, LLC**

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|-----------------------|----------|
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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:

1. UAG Kissimmee Motors, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")

2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 58-2361341
(FEI number, if applicable)

4. 10/1/2019
(Date first transacted business in Florida, if prior to registration;
(See sections 605.0901 & 605.0905, F.S. to determine penalty liability))

5. 2555 Telegraph Rd.
(Street Address of Principal Office)

6. 2555 Telegraph Rd.
(Mailing Address)

Bloomfield Hills, MI 48302

Bloomfield Hills, MI 48302

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By: C T Corporation System James M. Halpin
(Registered agent's signature) Assistant Secretary

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

☐ Manager Name: Penske Automotive Group, Inc.

☒ Member Address: 2555 Telegraph Rd.

☐ Authorized Bloomfield Hills, MI 48302

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Anthony Sciorilli

☐ Member Address: 2555 Telegraph Rd.

☒ Authorized Bloomfield Hills, MI 48302

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: J.D. Carlson

☐ Member Address: 2555 Telegraph Rd.

☒ Authorized Bloomfield Hills, MI 48302

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☐ Manager Name: Maggie Feher

☐ Member Address: 2555 Telegraph Rd.

☒ Authorized Bloomfield Hills, MI 48302

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Robert H. Kurnick Jr.

☐ Member Address: 2555 Telegraph Rd.

☒ Authorized Bloomfield Hills, MI 48302

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Tyler Heard

☐ Member Address: 2555 Telegraph Rd.

☒ Authorized Bloomfield Hills, MI 48302


Person _____

☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



 Signature of an authorized person

Maggie Feher, Authorized Representative

 Typed or printed name of signer

Delaware

The First State


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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "UAG KISSIMEE MOTORS, 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 NINTH DAY OF OCTOBER, A.D. 2019.

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

FILED
2019 OCT 10 PM 4:45
TALLAHASSEE, FLORIDA




Jeffrey W. Bullock, Secretary of State