19900000898

| 37 N. \ | DRATE CENTER /ERMILION LLE, IL 61832 | | |
|----------------------|--|--|------------------|
| City/Stat | e/Zip Phone # | Office Use Only | <u></u> . |
| CORPORATION 1. | N NAME(S) & DOCUMENT NUMB | · | |
| (Co | rporation Name) (Docu | unent#) | · III |
| 2(Co | poration Name) (Docu | ment#) | · <u></u> _ |
| 3(Con | poration Name) (Docum | | |
| 4(Cor | poration Name) (Docum | ment #) | v |
| ☐ Walk in ☐ Mail out | Pick up time Will wait Photocopy | Certified Copy Certificate of Status | - |
| NEW FIFTINGS | AMENDMENTS | | |
| Profit | Amendment | 400002891834 -06/02/9901007019 | -6 |
| NonProfit | Resignation of R.A., Officer/ Director | *****293,75 *****293. | 75 |
| Limited Liability | Change of Registered Agent | | - |
| Domestication | Dissolution/Withdrawal | | |
| Other | Merger | | |
| OTHER FILINGS | DECISEDA WON | A | |
| Annual Report | REGISTRATION/ QUADRICATION | Y TATE SECTION AND | - |
| Fictitious Name | Foreign | ARCH UN F | |
| Name Reservation | Limited Partnership | FILED 99 JUN 17 PM 1: 53 SECRUTARY OF STATE TALLAHASSEE, FLORIDA | 21 21 |
| | Reinstatement | OF FE | · |
| | Trademark | 1: 53 1: 53 | |
| | Other | JA S | |
| | | · | WA. A |

CR2E031(1/95)

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 2, 1999

AUTOMOTIVE DEALERS FINANCIAL GROUP, L.L.C. 37 N VERMILION DANVILLE, IL 61832

SUBJECT: AUTOMOTIVE DEALERS FINANCIAL GROUP, L.L.C.

Ref. Number: W99000012826

We have received your document for AUTOMOTIVE DEALERS FINANCIAL GROUP, L.L.C. and your check(s) totaling \$293.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

You must list your Federal Employer Identification Number in the appropriate block. If applied for, enter "applied for", or if not applicable, enter "N/A".

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6043.

Shawn Logan Document Specialist

Letter Number: 099A00030060

19 JUN 17 PM 1: 53 ECKETAKY OF STATE MITAHASSEE FLORINA

ווא וין אין ויי

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:

| 1. Aut (Name of forms so contains | omotive Dealer's Firoreign limited liability company med in the name at present.) | nancial Group nust end with the word | ds "limited company" or their abbre | viation "L.C." if not | |
|---|---|---|--|--|------------------------------------|
| 2. <u>Illi</u> (Jurisdiction company is | nois n under the law of which foreign l organized) | 3 | applied for (FEI number, if applied | cable) | - |
| 4. Apri | 1 29, 1999 (Date of Organization) | | Perpetual (Duration: Year limited liability co exist or "perpetual") | mpany will cease to | <u> </u> |
| | | | ions 608.501, 608.502, and 817.15 | • | |
| 7. <u>37 N</u> | . Vermilion, Danvil | le, IL 6183 | 32 | <u> </u> | <u>.</u> |
| 8. List name. | | (Street address of pr | - , | | |
| Will manaş | title, and business address of the foreign limited liabilited. NAME & ADDRESS: | of each managing not be company in Flore TITLE: | member[MGRM] or manager rida: (attach additional page in NAME & ADDRESS: | r[MGR]who f necessary) TITLE: | |
| Will manaş | ge the foreign limited liabilit | y company in Floi | rida: (attach additional page i | f necessary) TITLE: | |
| Will manaş | ge the foreign limited liabilit | y company in Flor TITLE: | rida: (attach additional page in NAME & ADDRESS: | f necessary) TITLE: | - |
| Will manaş | NAME & ADDRESS: Dennis Starkey | y company in Flor TITLE:Mgrm | nida: (attach additional page in NAME & ADDRESS: | f necessary) TITLE: Mgrm 332 | |
| Will manaş | NAME & ADDRESS: Dennis Starkey 37 N. Vermilion | y company in Flor TITLE: Mgrm | NAME & ADDRESS: Doyle Abney 37 N. Vermilion Danville, IL 618 | f necessary) TITLE: Mgrm | 는 사람들이 있는 것이 없는 것이 없는 것이 없는 것이 없다. |
| Will manaş | NAME & ADDRESS: Dennis Starkey 37 N. Vermilion Danville, IL 618 | y company in Flor TITLE: Mgrm 32Mgrm | NAME & ADDRESS: Doyle Abney 37 N. Vermilion Danville, IL 618 | TITLE: Mgrm SECAL AHA | |
| Will manaş | NAME & ADDRESS: Dennis Starkey 37 N. Vermilion Danville, IL 618 Steve Wireman | y company in Flor TITLE: Mgrm 32Mgrm | NAME & ADDRESS: Doyle Abney 37 N. Vermilion Danville, IL 618 | TITLE: Mgrm SECAL AHA | |
| Will manaş | NAME & ADDRESS: Dennis Starkey 37 N. Vermilion Danville, IL 618 Steve Wireman 37 N. Vermilion | y company in Flor TITLE: Mgrm 32 Mgrm 832 | NAME & ADDRESS: Dovle Abney37 N. VermilionDanville, IL 618 | TITLE: Mgrm 99 JUN 17 SECHLIARY ASSE | |
| Will manaş | Dennis Starkey 37 N. Vermilion Danville, IL 618 Steve Wireman 37 N. Vermilion Danville, IL 618 | y company in Flor TITLE: Mgrm 32Mgrm 832 | NAME & ADDRESS: Doyle Abney 37 N. Vermilion Danville, IL 618 | TITLE: Mgrm 99 JUN 17 PM 1: 53 SECHLIARY OF STAIL HASSEE, FLORDA | |

^{9.} Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state 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 submitted.)

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: |
|--|
| Automotive Dealers Financial Group, L.L.C. |
| 2. The name and the Florida street address of the registered agent and office are: |
| Robert Kelly |
| (Name) |
| Florida street address (P.O. Box NOT ACCEPTABLE) |
| Wilton Manors FL 33305 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.

(Signature)

Filing Fee: \$ 35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

| The undersigned member or authorized representative of a member ofAutomotis | vė |
|--|---------------|
| Dealer's Financial Group, L.L.C. certifies: | - *** |
| 1) the above named limited liability company has at least one member; | |
| 2) the total amount of cash contributed by the member(s) is | \$ 300,000.90 |
| 3) if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.) and | \$;; |
| 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is (This total includes amounts from 2 and 3 above.) | \$ 300,000.00 |
| Signature of a member or an authorized representative of a mem (in accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) | ber. |
| DENNIS L. STANKEY Typed or printed name of signee | |

Filing Fee: \$250.00 for Application and Affidavit

99 JUN 17 PM 1: 53
SLOKETARY OF STATE



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

AUTOMOTIVE DEALER'S FINANCIAL GROUP, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON APRIL 28, 1999, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILING OF THE ARTICLES AND PAYMENT, AND IS ORGANIZED TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS.

In Testimony Whereof, I, hereto set

| my hand an | d cause to b | be affixed | the | Great | Seal | of |
|--------------|---------------|------------|-----|-------|------|----|
| the State of | Illinois, thi | is | | 147 | CH. | • |
| day of | MAY | A.I |). | 1999 |) | |