

F97000006486

FILING COVER SHEET

ACCOUNT NUMBER: ECA000000014

REFERENCE: 0158. 1159

DATE: 12-9-97

CONTACT NAME: CINDY HICKS

REQUESTOR NAME: CORPORATE & CRIMINAL RESEARCH SERVICES
103 N. MERIDIAN STREET, LOWER LEVEL
TALLAHASSEE, FL 32301

TELEPHONE: 904-222-1173

AUTHORIZATION: Cindy Hicks

CORPORATION NAME: Aaron's Automotive Products,
Inc

DOCUMENT NUMBER: _____
(if known)

500002367125--3

- ARTICLES OF INCORPORATION
- ARTICLES OF AMENDMENT
- ARTICLES OF DISSOLUTION
- ANNUAL REPORT
- TRADEMARK/SERVICE MARK
- FICTITIOUS NAME
- CERT. OF AUTHORITY
- LIMITED PARTNERSHIP
- LIMITED LIABILITY
- REINSTATEMENT
- UCC 1
- UCC 3

- CERTIFIED COPY
- CERTIFICATE OF STATUS
- PLAIN STAMPED COPY

COST LIMIT

70.00

- CALL WHEN READY
- CALL IF PROBLEM
- AFTER 4:30
- WALK IN
- WILL WAIT
- PICK UP
- MAIL OUT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 DEC -9 PM 2: 38

LC
12/9

RECEIVED
97 DEC -9 PM 2: 19
DIVISION OF CORPORATION

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

- 1. AARON'S AUTOMOTIVE PRODUCTS, INC.
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Delaware (State or country under the law of which it is incorporated)
3. 95-4487801 (FEI number, if applicable)
4. April 25, 1994 (Date of Incorporation)
5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")
6. December 1, 1997 (Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)
7. 2600 North Westgate
Springfield, Missouri 65803 (Current mailing address)
8. Remanufacturer of automotive parts.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: NRAI Services, Inc.
Office Address: 526 E. Park Avenue
Tallahassee, Florida, 32301 (Zip Code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

SEE ATTACHED
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: See attached.

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: See attached.

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Charles L. Harper
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Charles L. Harper, Secretary
(Typed or printed name and capacity of person signing application)

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2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. _____ 5. _____
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. _____
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. _____
(Current mailing address)

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8. _____
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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C. Baclet C. Baclet
(Registered agent's signature) Vice President

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**ADDENDUM TO
APPLICATION FOR CERTIFICATE OF AUTHORITY
FOR
AARON'S AUTOMOTIVE PRODUCTS, INC.**

Current Officers:

Chief Executive Officer	Stephen J. Perkins 900 Oakmont Lane, Suite 100 Westmont, IL 60559
President	James R. Wehr 2600 North Westgate Springfield, Missouri 65803
Chief Financial Officer and Secretary	Charles L. Harper 2600 North Westgate Springfield, Missouri 65803
Vice President	Kenneth A. Bear 2600 North Westgate Springfield, Missouri 65803
Assistant Secretary	John C. Kent 900 Oakmont Lane, Suite 100 Westmont, IL 60559
Assistant Secretary	Mark C. Hardy 1800 Century Park East, Suite 1000 Los Angeles, California 90067

Directors:

Richard R. Crowell
1800 Century Park East, Suite 1000
Los Angeles, California 90067

Richard K. Roeder
1800 Century Park East, Suite 1000
Los Angeles, California 90067

Stephen J. Perkins
900 Oakmont Lane, Suite 100
Westmont, IL 60559

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State of Delaware
Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AARON'S AUTOMOTIVE PRODUCTS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF DECEMBER, A.D. 1997.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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Edward J. Freel

Edward J. Freel, Secretary of State

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AUTHENTICATION:

8793540

DATE:

12-05-97