Filing and License Fee: \$310.00 minimum ID Number:	ID Number:							
STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division	2009 F							
148 W. River Street Providence, Rhode Island 02904-2615	JEEB-5 PM							
BUSINESS CORPORATION	o PH							
APPLICATION FOR CERTIFICATE OF AUTHORITY	ე: 							
Pursuant to the provisions of Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended, the underst corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purp the following statement: 1. The name of the corporation is First Group Leasing Nominee Trust No 2008-1	JOSE SUDITIO							
2. It is incorporated under the laws of Delaware								
3. The name, if different, which it elects to use in Rhode Island is:								
(a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation," "company," "incorporated," or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island:								
4. The date of its incorporation is August 11, 2008 and the period of its duration is perpetual								
5. The address of its principal office in the state or country under the laws of which it is incorporated is 40 U)e 115 Fa	rgo							
Delaware Trust Company 919 North Market St Suite 1600 Wilmington, DE	19801							
6. The address of its proposed registered office in Rhode Island is 222 Jefferson Blvd Suite 20 (Street Address, not P.O. Box)	50							
Warwick RI 02888 and the name of its proposed registered agent in Rh (City/Town) (Zip Code) that address is Corporation Service Company (Name of Agent)	ode Island at							
7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: hold little to motor vehicles								

8. (a) The names and respective addresses of its directors (optional unless directors are required under the laws of the state or country

Trustee

Form No. 150 Revised: 12/05

Director Director

of which it is incorporated).

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(b) The names and respective addresses of its principal officers (mandatory if directors are not required under the laws of th							
	state or country of which it is incorporated). Name			Address			
	Pr	President					
Vice President		Vice President		}			
Treasurer Secretary			10/1	· · · · · · · · · · · · · · · · · · ·			
	36	cr o tal y	······				
9.	The and	aggregate num series, if any, w	ber of shares which ithin a class, is:	th it has authority to	issue, itemized by classes, p	ar value of shares, shares without par value,	
						Par Value or Statement that	
	М	Number of	<u>Shares</u> Trace Trace +	<u>Class</u>	<u>Series</u>	Shares are without Par Value	
	77	in NDUS					
10.	(a)	An estimate of \$ 125 m	f the value of all	property to be ov	vned by the corporation for	the following year, wherever located, is	
	(b)	An estimate o	f the value of th	e corporation's prop	erly to be located within F	Rhode Island during the following year is	
	(c)					alue of the property of the corporation to be of the corporation to be owned during the ultiply by 100 to obtain the percentage].	
11.	(a)	An estimate o		unt of business to		poration during the following year is	
	(b)	An estimate of	of the gross amou		e transacted by the corporati	ion at or from places of business in Rhode	
	(c)	An estimate,	expressed as a por from places of the corporation	ercentage, of the p	proportion that the gross an	nount of business to be transacted by the ears to the gross amount thereof which will vide (b) by (a) and multiply by 100 to obtain	
12.	This of w	application is a	accompanied by a orated.	certificate of Good S	Standing issued by the proper	r officer of the state or country under the laws	
13.	This than	Application for the 90 th day at	Certificate of Auth	ority shall be effecti-	ve upon filing unless a speci	fied date is provided which shall be no later	1
De	ite:	02:04	-2009		examined this Application any accompanying at contained herein are true. Signature of Au	ary, I declare and affirm that I have on for Certificate of Authority, including tachments, and that all statements and correct. Well have book NA, os thorized Officer of the Corporation it Name of Authorized Officer	

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JAN 22, 2009 3:53PM CSC16175233189

Delaware

The First-State

I, JEFFREY N. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED ARE TRUE AND CORRECT COPIES OF ALL DOCUMENTS ON FILE OF "FIRSTGROUP LEASING NOMINEE TRUST NO. 2008-SB-I" AS RECEIVED AND FILED IN THIS OFFICE.

THE FOLLOWING DOCUMENTS HAVE BEEN CERTIFIED:

CERTIFICATE OF STATUTORY TRUST REGISTRATION, FILED THE ELEVENTE DAY OF AUGUST, A.D. 2008, AT 5:06 O'CLOCK P.M.

RESTATED CERTIFICATE, FILED THE FIFTEENTH DAY OF AUGUST, A.D. 2008, AT 6:24 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE AFORESAID STATUTORY TRUST, "FIRSTGROOP LEASING NOMINEE TRUST NO. 2008-55-1".

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You may verify this cortificate online as desp. calendre. gov/author. shiel

AUTHENTICATION: 7094012

DATE: 01-22-09