Filing and License Fee: \$310.00 minimum



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Division of Business Services 148 W. River Street Providence, Rhode Island 02904-2615

#### **BUSINESS CORPORATION**

### APPLICATION FOR CERTIFICATE OF AUTHORITY

CORPORATIONS DIV

Pursuant to the provisions of Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1.	The nam	of the corporation is Payless Car Rental, Inc.						
2.	It is incorporated under the laws of Nevada							
3.	The nam	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", "comporated", or "limited" or an abbreviation thereof, then list the name of the corporation with the addition of one of above corporate endings for use in Rhode Island:							
	qua	(b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:						
4.	The date	of its incorporation is 02/24/1978 and the period of its duration is Perpetual						
5.		ess of its principal office is 6 Sylvan Way, Parsippany, New Jersey 07054						
		The address of its proposed registered office in Rhode Island is 222 Jefferson Boulevard, Suite 200  (Street Address, not B.O. Box)						
6.	THE add	(Street Address, not P.O. Box)						
	Warwic							
	(City/Town) (Zip Code)							
	that add	ess is Corporation Service Company (Name of Agent)						
_								
7.	The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:							
	Vehicle	rental business.						
8.	(a) The names and respective addresses of its directors (optional unless directors are required under the laws of the state or country of which it is incorporated).							
		<u>Name</u> <u>Address</u>						
	Director	Please see attached.						
	Director							
	Director							
	Director							
	Ollogion	MAR 1 1 2014						
	Form No Revised:	150						
		D. D. 10 . 1						

			<u>Name</u>	•	<u>Address</u>
	President	Please se	e attached.		
	Vice President				
	Treasurer				
	Secretary				
9.		number of shares y, within a class, i		issue; itemized by classes,	par value of shares, shares without par value,
	Number of S	•		<u>Series</u>	Par Value or Statement that Shares are without Par Value
	25,00		COHHON	<u>ognes</u>	1.00
10.	(a) \$following ye	ear, wherever loc		e of the value of all prop	erty to be owned by the corporation for the
	(b) \$	og the following ye	= An estimate	e of the value of the corpo	oration's property to be located within Rhode
	(c) the corpora	% = An es	stimate, expressed as a plant of the state o	the following year bears to	on that the estimated value of the property of the value of all property of the corporation to tiply by 100 to obtain the percentage.
11.	(a) \$during the f	Mi //ox/	= An estimate	e of the gross amount of	business to be transacted by the corporation
	(b) \$ // or from place	De HILION Des of business in	= An estimatent	e of the gross amount of b	usiness to be transacted by the corporation at
	transacted thereof whi the percent	by the corporation ich will be transaction	in at or from places of bu	usiness in this state during	tion that the gross amount of business to be the following year bears to the gross amount divide (b) by (a) and multiply by 100 to obtain
12.	This application laws of which it	is accompanied is incorporated.	by a certificate of Good	Standing issued by the p	roper officer of the state or country under the
13.	This Application	ı for Certificate of	Authority shall be effective	ve upon filing unless a spec	rified date is provided which shall be no later
	than the 90th da	ay after the date of	of this filing		
				Application for Certificat	l declare and affirm that I have examined this e of Authority, including any accompanying Il statements contained herein are true and
Dat	le: March	n 6,2011	Ł	(Sygon lo	THE Striper of the Corporation
		•		Bryon Koepke, Secreta	

Type or Print Name of Authorized Officer

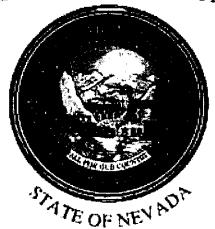
# Payless Car Rental, Inc. Officers & Directors

Name	Title			
Gartland, Thomas M.	Director			
Nelson, Ronald L.	Director			
Wyshner, David B.	Director			
Bruzzichesi, Gina Marie	President			
Crowther, David B.	Senior Vice President			
Koepke, Bryon L.	Secretary			
Peros, Juliette	Vice President, Tax			
Gallagher, Paul	Assistant Secretary			
Infante, Michael	Assistant Treasurer			
Linnen, Edward P.	Senior Vice President and Chief HR Officer			
Wyshner, David B.	Senior Executive Vice President, Chief Financial Officer and Treasurer			

Address for all Officers and Directors is: 6 Sylvan Way Parsippany, NJ 07054



SECRETARY OF STATE



# CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **PAYLESS CAR RENTAL**, **INC**., as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since February 24, 1978, and is in good standing in this state.

TOUR COMMITTEE

Electronic Certificate
Certificate Number: C20140310-2222
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on March 10, 2014.

ROSS MILLER Secretary of State