

State of Rhode Island and Providence Plantations **Department of State - Business Services Division** 

## **Application for Registration**

Application for Registration FOREIGN Limited Liability Company		NT 25
→ Filing Fee: \$150.00		PH 3:
<sup>D</sup> ursuant to the provisions of RIGL <u>7-16-49</u> , the undersig applies for a Certificate of Registration to transact busine purpose submits the following statement:		
1. The name of the limited liability company is:		
RENTAL CAR FINANCE LLC		
Is this company organized in its state or country of fo	ormation as a low-profit limited liability company	? Yes Nox
The name, if different, under which it proposes to registe	er and transact business in Rhode Island is:	
2. The LLC is organized under the laws of:	Oklahoma	
3. The date of its organization is:	06/22/2016	
And the period of its duration is: CHECK ONLY ONE B	ox	
x Perpetual (on-going)		
Date certain for dissolution		

2016 ()

18

The name and address of the resident agent/office in Rhode Island is:

Agent Name C T Corporation System

liability company is organized is:

Street Address (NOT a P.O. Box) 450 Veterans Memorial Parkway, Suite 7A

Zip Code 02914 City/Town State East Providence RHODE ISLAND 5. The Department of State is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence. 6. The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited

5601 Northwest Expressway, Oklahoma City, OK 73132

MAIL TO: **Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov

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FORM 450 - Revised: 05/2016

7.	The	mailing	address	for the	limited	liability	company	/ is:

8501 Williams Road, Estero, FL 33928

8. Management of the Limited Liability Company:

The limited liability company is managed:

By its members (If you have checked this box, go to Section 9. (DO NOT fill out the chart below.)

By one (1) or more managers (List managers below)

MANAGER	ADDRESS	
		·
	Certificate of Good Standing/Letter of Status issue	
state of country under the laws of which	it is formed that is dated within 60 days of the filing	of this document.
10. Date when this application for Certific	ate of Registration will be effective: CHECK ONLY	ONE BOX
X Date received (Upon filing)		
Later effective date (Date must be n	o more than 30 days from the day of filing)	······································
Under penalty of perjury, I declare and al	firm that I have examined this Application for Regi	stration, including any
	statements contained herein are true and correct.	
Type or Print Name of LLC	Λ	Date
Jennifer Kurz	//	10/24/2016
<u>A ///</u>	/	
Signature of Authorized Person	<u> </u>	
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V		

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.



## CERTIFICATE OF GOOD STANDING DOMESTIC LIMITED LIABILITY COMPANY

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that <u>RENTAL CAR FINANCE LLC</u> whose registered agent is <u>THE CORPORATION COMPANY</u>, with its registered office at <u>1833 S</u> <u>MORGAN RD</u> <u>OKLAHOMA CITY 73128</u> <u>USA</u> Oklahoma is a <u>Domestic Limited</u> <u>Liability Company</u> duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this <u>24th</u>, day of <u>October</u>, <u>2016</u>.

Secretary Of State



State of Rhode Island and Providence Plantations **Department of State** | **Office of the Secretary of State Nellie M. Gorbea**, Secretary of State

## I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island

## and Providence Plantations, hereby certify that this document, duly executed in

accordance with the provisions of Title 7 of the General Laws of Rhode Island, as

amended, has been filed in this office on this day:

Tulli U. Hole

Nellie M. Gorbea Secretary of State

