

Filing Fee: \$50.00

ID Number: 17125



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

FICTITIOUS BUSINESS NAME STATEMENT
(To Be Filed In Duplicate)

Pursuant to the provisions of Section 7-1.1-7.1, 7-16-9 or 7-13-2 of the General Laws, 1956, as amended, the undersigned business corporation, limited liability company or limited partnership hereby submits the following statement for authority to transact business in the State of Rhode Island under a fictitious business name:

1. The legal name of the applicant business corporation, limited liability company or limited partnership is:

North Atlantic Distribution, Inc.

2. The fictitious business name to be used is NORAD

3. The state or territory under the laws of which it is incorporated, organized or formed is Rhode Island

4. The date of incorporation, organization or formation is March 29, 1984

5. If a business corporation, the address of its registered office within Rhode Island is _____

One BankBoston Plaza, Providence, RI 02903

6. If a business corporation, the business in which it is engaged _____

Servicing automobiles imported by others

7. Applicant is otherwise authorized to do business in the State of Rhode Island.

Under penalty of perjury, I declare that the information contained herein is true and correct.

Dated July 3, 19 98

North Atlantic Distribution, Inc.
(Name of Applicant Corporation, Limited Liability Company or Limited Partnership)

By Gay R. Fannon Assistant Secretary
(Signature of Officer for the Corporation) (Title)

or

By _____
(Authorized Person for the Limited Liability Company)

or

By _____
(Authorized Person for the Limited Partnership)

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JUL 03 1998
By CC# 507367

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