Filing Fee: \$150.00

ID Number: 154362



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

### LIMITED LIABILITY COMPANY

#### APPLICATION FOR REGISTRATION

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

l	The name of the limited liability company is:				
	American Suzuki Financial Services Company LLC				
2.	The name, if different, under which it proposes to register and transact business in Rhode Island is:				
3	The limited liability company is organized under the law	s of Delaware			
4.	The date of its organization is February 8, 2002				
5.	Perpetual				
6	The address of the limited liability company's resident a	agent in Rhode Island	is:		
	10 Weybosset Street	Providence		02903	
	(Streel Address. not P O Box)	(City/To	wn)	(Zip Code)	
and the name of the resident agent at such address is C I Corporation System			em (Name of Agent)		
7	The secretary of state is appointed the agent of the follower time there is no resident agent or if the resident agent diligence	cannot be tourid of se	IN SECTION AND THE	S OXBIGISC OF PUBLICATION	
3	The address of any office required to be maintained limited liability company is organized is:	In the state or other	jurisdiction unde	r the laws of which the	
	c/o Corporation Trust Company, Corporation Trust Center, 1.	209 Orange St., Wilmin	gton, DE 19801	<u></u>	
9	The mailing address for the limited liability company is: 17500 Chenal Parkway, Suite 400, Little Rock, AR 72223				
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Re	v/lsed: 07/05	Y.m.	•		

10	Management of the Limited Liability Company:				
A	The limited liability company is to b	be managed v by its members (If you have checked this box, go to item			
	<u>or</u>				
В	The limited liability company is to be managed by one (1) or more managers (If the limited liability company has managers at the time of the filing of these Articles of Organization, state the name an address of each manager.)				
	<u>Manager</u>	<u>Address</u>			
_					
11 Th	is application is accompanied by a c thorized officer of the jurisdiction und	ertificate of good standing duly authenticated by the secretary of state or other ler which the foreign limited liability company was organized			
Application		Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct			
Date:	3-1-2006	American Suzuki Financial Services Company LLC  Print Exact Name of Limited Liability Company Making Application			
		Sylvia Borche Signature of authorized person  Asst Sec. Authorized Person. Basic Credit Holding  Company, L. L. C., Member			

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# Delaware

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AMERICAN SUZUKI FINANCIAL SERVICES COMPANY LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTH DAY OF MARCH, A.D. 2006.

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

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AMERICAN SUZUKI FINANCIAL SERVICES COMPANY LLC" WAS FORMED ON THE EIGHTH DAY OF FEBRUARY, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4569196

DATE: 03-06-06

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