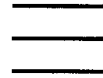



DEPARTMENT OF MOTOR VEHICLES

Registration Operations Division MS H875
 P.O. BOX 932370 Sacramento, CA. 94232-3700
 (916) 657-8153



01/10/2017

REPOSSESSION SPECIALISTS INC
 PO BX 371368
 SAN DIEGO, CA 92137

 <p>MOTOR CARRIER PERMIT</p>									
<p>DEPARTMENT OF MOTOR VEHICLES Registration Operations Division P.O. BOX 932370 Sacramento, CA. 94232-3700</p> <p>REPOSSESSION SPECIALISTS INC PO BX 371368 SAN DIEGO, CA 92137</p>	<table border="1"> <tr> <td>Valid From:</td> <td>01/09/2017</td> <td>Valid Through:</td> <td>12/31/2017</td> </tr> <tr> <td>CA#:</td> <td colspan="3">0399482</td> </tr> </table>	Valid From:	01/09/2017	Valid Through:	12/31/2017	CA#:	0399482		
	Valid From:	01/09/2017	Valid Through:	12/31/2017					
CA#:	0399482								
<p>The carrier named on this permit, having made written application to the Department of Motor Vehicles for a permit to operate as a motor carrier of property as defined in vehicle code section 34601, and having met the requirements and paid the appropriate fees, is granted a permit of the following classification:</p> <p style="text-align: center;">Private Full Year Corporation</p>									
<table border="1"> <tr> <td>Pmt Date: 01/09/2017</td> <td>Office #: 154</td> </tr> <tr> <td>Account #: 623164</td> <td>Tech ID: AC</td> </tr> <tr> <td>Sequence #: 0002</td> <td>Amt Paid: \$187.00</td> </tr> </table>	Pmt Date: 01/09/2017	Office #: 154	Account #: 623164	Tech ID: AC	Sequence #: 0002	Amt Paid: \$187.00			
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!!!IMPORTANT REMINDERS!!!

1. Your permit will expire at midnight on the 'Valid Through' date. If you do not receive a renewal notice 30 days prior to the expiration date, please submit an original application and check the "Renewal" box.
2. Your insurance must remain valid through the term of your permit or a suspension action could occur.
3. Changes to your fleet are not required to be reported until your renewal.
4. Changes to your business entity may require a new CA# and application for another Motor Carrier Permit.
5. If you decide to no longer operate as a motor carrier of property, you must submit a 'Voluntary Withdrawal' form.
6. For changes to the address, business name, officers, or authorized representative's name, please complete the 'Notice of Change' form. Changes during your renewal period may be submitted on your renewal application.
7. You may download forms from the Internet at www.dmv.ca.gov or receive further information by calling: (916) 657-8153.

California Relay Telephone Service for the deaf or hearing impaired from TDD Phones: 1-800-735-2929; from Voice Phones: 1-800-735-2922