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WAY SHIPPER

## TRANSMITTAL LETTER

TO:		ration Se on of Co		ions					i.				
SUBJ	ECT:	Nation	wide	Credit Serv	ice Inc								
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Dear S	ir or Ma	d <b>am</b> :											
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				1340 12th	Ave.								
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				Longview	WA	98632							
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#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 7, 2005

JANICE SOPHER NATIONWIDE CREDIT SERVICE INC 1340 12TH AVE LONGVIEW, WA 98632

SUBJECT: NATIONWIDE CREDIT SERVICE INC

Ref. Number: W05000028203

We have received your document for NATIONWIDE CREDIT SERVICE INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing Document Specialist

Letter Number: 005A00039997



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 29, 2005

JANICE SOPHER NATIONWIDE CREDIT SERVICE INC 1340 12TH AVE LONGVIEW, WA 98632

SUBJECT: NATIONWIDE CREDIT SERVICE INC.

Ref. Number: W05000028203

We have received your document for NATIONWIDE CREDIT SERVICE INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The doing business as name is not available either.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing Document Specialist

Letter Number: 005A00043913

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

' ·	Credit Service Inc.				
	orporation; must include "INCOR orp," "Inc," "Co," or "Corp.")	PORATED,"	*COMPANY," "CORPO	RATION,"	
	Account	3 Kecei	vable Credit 3	inc.	
(If name unavaila	able in Florida, enter alternate corp	crate name a	dopted for the purpose of tr	ansecting busin	ess in Florida)
Washington		3.	91-0987877		
(State or country	under the law of which it is incorp	orated)	(PEI number	, if applicable)	
3/16/77		5.	Perpetual  (Duration: Year corp. will	•	
(Date	of incorporation)		(Duration: Year corp. will	cease to exist o	r "perpetual")
upon qualifica	ation			<u></u>	
			Florida, if prior to registrati 12, F.S., to determine penalt		
1340 12th Ave.			Longview	WA	98632
,	(Principe	al office addre	:53)	<u>"</u>	
PO Box 178	7		Longview	WA	98632
	(Current	mailing addiv	252)		
. <u>Debt Collectio</u> (Furpose(s	n ) of corporation authorized in hon	ne state or out	intry to be carried out in sta	te of Florida)	
. Name and stree	et address of Plorida registered (	agent: (P.O.	Box NOT acceptable)	7	. U . L-3
Name:	Corporation Service Company	у			
office Address:	1201 Hays Street			سنگ سنگ دور برک	
, , , , , , , , , , , , , , , , , , , ,	Tallahassee			1 = 60 62 63	25!
	(City)		, Florida 32301 (Zip code	<u> </u>	'3 o :
			Coult 144	· [	الي الم
	gent's acceptance:			د. مأسست السياسية السيا	
saving veen nam lesionated in this	ed as registered agent and to a application, I hereby accept th	iccept servic w appointm	e oj process jor me anav ent as registered avent a	e saucu corpa nd aoree to ac	rauon usane pi Ebs this canaci
itriher agree to c	omply with the provisions of at	li statutes re	lative to the proper and c	oneplete perfo	
nd I am famillas	with and accept the obligation	us of my pos	ition as registered agent.		
	H	~ <i>*</i>	e., )		
	Secural (Registered agents	red ()	yeon_	····	
	(weBlatelen #Beut.	a signature	•		

- 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and business addresses of officers and/or directors:

A. DIRE	CTORS			
Chairman:			·	
Address:		* *	· <del>· ·</del>	
- Vice Chai	rman:			
Address:				· · · · · · · · · · · · · · · · · · ·
– Director;	Herbert Irwin Lakefish			
Address:	1340 12th Ave Longview WA 98632			
Director:			•	
Address:			<del></del>	
B. OFFI				
President:	See Attached List of Officers		· · · · · · · · · · · · · · · · · · ·	
Address:				
Vice Presi	dent:			
Address:	•			
Secretary:				
Address:	•			To the second
Treasurer				<u> </u>
Address:				
NOTE:	If necessary, you may attach an adden		=	
13. In	Janue Joglan Sec (Signature of Director or	retory		5-20-05
14.	(Signature of Director or Janice Sopher, Secretary	Uincer (Isted in Mi	imper 12 of the applican	ton)
		s and capacity of po	erson signing application	n)

### Nationwide Credit Service Inc. LIST OF OFFICERS

#### **PRESIDENT**

Phillip Guy Lovingfoss 1340 12th Ave. Longview WA 98632 360-425-6930/800-426-8648 360-423-2354 fax #

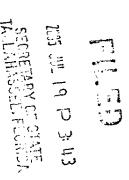
#### VICE PRESIDENT

#### TREASURER

Rachel Elaine Pinkston 1340 12th Ave. Longview WA 98632 360-425-6930/800-426-8648 360-423-2354 fax#

### SECRETARY

Janice Sopher 1340 12th Ave. Lengview WA 98632 360-425-6930/800-426-8648 363-423-2354 fax #





Secretary of State

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

# CERTIFICATE OF EXISTENCE/AUTHORIZATION OF

NATIONWIDE CREDIT SERVICE INC.

I FURTHER CERTIFY that the records on file in this office show that the above named Profit

Corporation was formed under the laws of the State of WA and was issued a Certificate Of

Incorporation in Washington on 3/16/1977.

I FURTHER CERTIFY that as of the date of this certificate, NATIONWIDE CREDIT SERVICE INC. remains active and has complied with the filing requirements of this office.

Date: May 17, 2005

UBI: 600-332-078

STATE OF A STATE OF A

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State