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DIVISION OF CORPORATIONS
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MRS
2/9

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cost Recovery Systems Inc
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Ray Harmon
(Name of Person)

(Firm/Company)

4619 Apache Avenue
(Address)

Jacksonville, FL 32210
(City/State and Zip code)

(864) 414-4335 (cell)
for Ray Harmon

For further information concerning this matter, please call:

Ray Harmon at (864) 414 4335
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

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.

1. Cost Recovery Systems Inc.
 (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Cost Recovery Systems Inc. of Florida
 (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. South Carolina 3. 57-1549648
 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. June 17, 1996 5. perpetual
 (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 9-1-2005
 (Date first transacted business in Florida, if prior to registration)
 (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 16 Lavinia Avenue, Greenville, SC 29601
 (Principal office address)

P.O. Box 9017 Greenville, SC 29604
 (Current mailing address)

8. marketing, business operations pertaining to ERISA health plan
 (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
 Name: Roy Harmon *claim administration; principally database management; lien notice*

Office Address: 4619 Apache Avenue
Jacksonville, Florida 32210
 (City) (Zip code)

10. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Roy J. Harmon
 (Registered agent's 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:

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A. DIRECTORS

Chairman: SID MAJOR

Address: P.O. Box 9017 Greenville, SC 29604

Vice Chairman: Roy Harmon

Address: P.O. Box 9017 Greenville, SC 29604

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Sidney MAJOR JR

Address: P.O. Box 9017

Greenville SC 29604

Vice President: Roy Harmon III

Address: P.O. Box 9017

Greenville, SC 29604

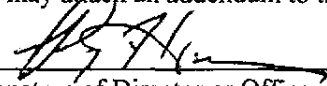
Secretary: Roy Harmon III

Address: P.O. Box 9017, Greenville, SC 29604

Treasurer: Sidney MAJOR JR

Address: P.O. Box 9017, Greenville, SC 29604

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. Roy Harmon
(Typed or printed name and capacity of person signing application)

The State of South Carolina



SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 FEB -6 PM

Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

COST RECOVERY SYSTEMS, INC.,
a corporation duly organized under the laws of the State of South Carolina on June 17th, 1996, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great
Seal of the State of South Carolina this
29th day of November, 2005.

Handwritten signature of Mark Hammond in cursive script.

Mark Hammond, Secretary of State