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(Requestor's Name)

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(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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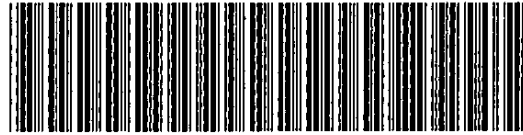
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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**TO:** New Filing Section  
Division of Corporations

06 DEC -5 PM 2:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**SUBJECT:** Professional Finance Company, 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:

Amy Salazar  
(Name of Person)

Professional Finance Company, Inc.  
(Firm/Company)

5754 W. 11th Street, Suite 100  
(Address)

Greeley, CO 80634  
(City/State and Zip code)

For further information concerning this matter, please call:

Amy Salazar at ( 970 ) 352-5000 ext. 327  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

New Filing 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. Professional Finance Company, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc.," "Co.," or "Corp.")

N/A

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Colorado 3. 84-0997320  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/30/1985 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 5754 W. 11th Street, Suite 100, Greeley, CO 80634  
(Principal office address)

P.O. Box 1686, Greeley, CO 80632-1686  
(Current mailing address)

8. Debt Collection  
(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324  
(City) (Zip code)

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TALLAHASSEE, FLORIDA

**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.*

C T Corporation System

By: Michele Miller  
(Registered agent's signature)

**Michele Miller**  
**Assistant Secretary**

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. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: Michael Vernon Shoop

Address: 5754 W. 11th Street, Suite 100

Greeley, CO 80634

Director: Lori Dayle Shoop

Address: 5754 W. 11th Street, Suite 100

Greeley, CO 80634

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TALLAHASSEE, FLORIDA

**B. OFFICERS**

President: Michael Vernon Shoop

Address: 5754 W. 11th Street, Suite 100

Greeley, CO 80634

Vice President: N/A

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: Lori Dayle Shoop

Address: 5754 W. 11th Street, Suite 100, Greeley, CO 80634

Treasurer: Lori Dayle Shoop

Address: 5754 W. 11th Street, Suite 100, Greeley, CO 80634

**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. Michael V. Shoop, President

(Typed or printed name and capacity of person signing application)

OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

**CERTIFICATE**

I, Ginette Dennis, as the Secretary of State of the State of Colorado, hereby certify that,  
according to the records of this office,  
PROFESSIONAL FINANCE COMPANY, INC.

is a  
Corporation

formed or registered on 10/30/1985 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 19871643504 .

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 11/01/2006 that have been posted, and by documents delivered to this office electronically through 11/06/2006 @ 12:40:27 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 11/06/2006 @ 12:40:27 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 6626093 .



SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
06 DEC -5 PM 2:09  
11/06/06

*Ginette Dennis*

Secretary of State of the State of Colorado

\*\*\*\*\*End of Certificate\*\*\*\*\*

*Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click Business Center and select "Frequently Asked Questions."*