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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO: New Filing Section
Division of Corporations

SUBJECT: PREMIER DEBT RECOVERY CENTERS, 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:

DAVID S. GED

(Name of Person)

DAVID S. GED, P.A.

(Firm/Company)

6622 WILLOW PARK DRIVE, SUITE #202

(Address)

NAPLES, FL 34120

(City/State and Zip code)

For further information concerning this matter, please call:

LINDA M. FOX

(Name of Person)

at (239) 514-5048

(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. PREMIER DEBT RECOVERY, INC.^{Centers}
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

PREMIER DEBT RECOVERY, INCORPORATED^{Centers}

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

2. TEXAS 3. 20-1859023
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. Nov 1, 2004 5. _____
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 10/01/2007
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 5700 GRANITE PARKWAY, SUITE 200, PLANO, TEXAS 75024
(Principal office address)

5700 GRANITE PARKWAY, SUITE 200, PLANO, TEXAS 75024
(Current mailing address)

8. _____
(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: DAVID S. GED, ESQUIRE

Office Address: 6622 WILLOW PARK DRIVE, #202
NAPLES, Florida 34109
(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.


(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.

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Edward Mandel

Address: 4939 Normandy Dr
Frisco, TX 75034

Vice Chairman: _____

Address: _____

Director: Scott Grizzle

Address: 4939 Normandy Dr
Frisco, TX 75034

Director: ~~Scott Grizzle~~ Samuel Mandel

Address: 4939 Normandy Dr
Frisco, TX 75034

B. OFFICERS

President: Edward Mandel

Address: 4939 Normandy Dr
Frisco, TX 75034

Vice President: _____

Address: _____

Secretary: Irene Mandel

Address: 4939 Normandy Dr Frisco TX 75034

Treasurer: _____

Address: _____

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. Edward Mandel, CEO, Chairman

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

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CLERK OF STATE
TAMPA FLORIDA



Office of the Secretary of State

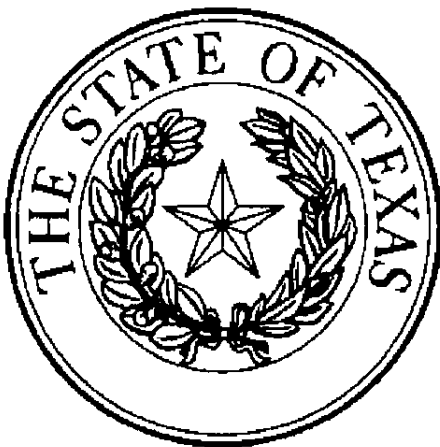
Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Incorporation for Premier Debt Recovery Centers, Inc. (file number 800408501), a Domestic For-Profit Corporation, was filed in this office on November 01, 2004.

It is further certified that the entity status in Texas is in existence.

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SECRETARY OF STATE
DALLAS, TEXAS

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on July 07, 2008.



A handwritten signature of Phil Wilson in black ink.

Phil Wilson
Secretary of State