

FOI 0000001430

TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ALLIED CREDIT SERVICE CO 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:

CAROLYN VOGEL 600003590476--6  
(Name of Person) -01/29/01--01107--016  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

ALLIED CREDIT SERVICE CO INC WO1-2232  
(Firm/Company)

8960 BAY COLONY DR  
(Address)

NAPLES FL 34108  
(City/State and Zip code)

For further information concerning this matter, please call:

Carolyn Vogel at (941) 591 4358  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**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

FILED  
01 MAR 15 AM 2:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

with  
3/15



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

January 30, 2001

CAROLYN VOGEL  
8960 BAY COLONY DR.  
NAPLES, FL 34108

SUBJECT: ALLIED CREDIT SERVICE CO INC.  
Ref. Number: W01000002232

We have received your document for ALLIED CREDIT SERVICE CO INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate 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) 487-6097.

Michael Mays  
Document Specialist

Letter Number: 501A00005552

01 MAR 15 AM 2:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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. ALLIED CREDIT SERVICE CO INC  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. NEW YORK 3. 13-3470504  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. FEB 1 1988 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. OCTOBER 2000  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 8960 BAY COLONY DR NAPLES FL 34108  
(Principal office address)  
PAM 6  
(Current mailing address)
8. CREDIT COLLECTION AGENCY  
(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 or Mail Drop Box **NOT** acceptable)  
Name: CAROLYN VOGEL  
Office Address: 8960 BAY COLONY DR  
NAPLES, Florida 34108  
(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.

x Carolyn Vogel  
(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:

A. DIRECTORS

Chairman: CAROLYN VOGEL

Address: 8960 BAY COLONY DR

NAPLES FL 34108

Vice Chairman: SAME AS ABOVE

Address:

Director: SAME AS ABOVE

Address:

Director: SAME AS ABOVE

Address:

B. OFFICERS

President: CAROLYN VOGEL

Address: 8960 BAY COLONY DR

NAPLES FL 34108

Vice President: SAME AS ABOVE

Address:

Secretary: SAME AS ABOVE

Address:

Treasurer: SAME AS ABOVE

Address:

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

13. X Carolyn Vogel

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. CAROLYN VOGEL

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

FILED  
01 MAR 15 AM 2:58  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**State of New York** } ss:  
**Department of State**

I hereby certify, that the Certificate of Incorporation of ALLIED CREDIT SERVICE CO., INC. was filed on 02/03/1988, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation. I further certify the following:

A Biennial Statement was filed 04/09/1993.

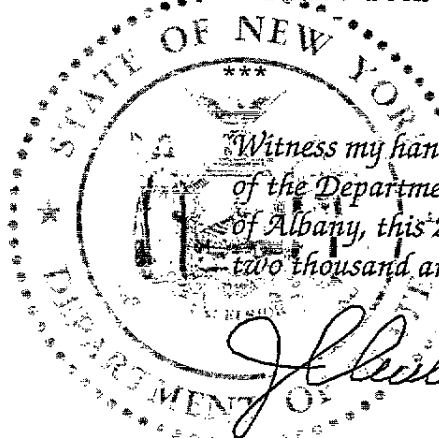
A Biennial Statement was filed 03/07/1994.

A Biennial Statement was filed 02/13/1998.

A Biennial Statement was filed 04/10/2000.

I further certify, that no other documents have been filed by such Corporation.

Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 23rd day of February  
two thousand and one.



*J. Leach*

Special Deputy Secretary of State

200102260136 46

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SECRETARY OF STATE  
ALBANY, NEW YORK

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CAROLYN VOGEL

(Name of Person)

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ALLIED CREDIT SERVICE CO INC WO1-2232  
(Firm/Company)

8960 BAY COLONY DR

(Address)

NAPLES FL 34108

(City/State and Zip code)

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Carolyn Vogel  
(Name of Person)

at ( 941 ) 591 4358  
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FLORIDA DEPARTMENT OF STATE

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Secretary of State

January 30, 2001

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(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
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(Current mailing address)
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A. DIRECTORS

Chairman: CAROLYN VOGEL

Address: 8960 BAY COLONY DR  
NAPLES FL 34108

Vice Chairman: SAME AS ABOVE

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

Director: SAME AS ABOVE

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

Director: SAME AS ABOVE

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

B. OFFICERS

President: CAROLYN VOGEL

Address: 8960 BAY COLONY DR  
NAPLES FL 34108

Vice President: SAME AS ABOVE

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

Secretary: SAME AS ABOVE

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

Treasurer: SAME AS ABOVE

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

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

13. X Carolyn Vogel  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. CAROLYN VOGEL  
(Typed or printed name and capacity of person signing application)

State of New York | ss:  
Department of State

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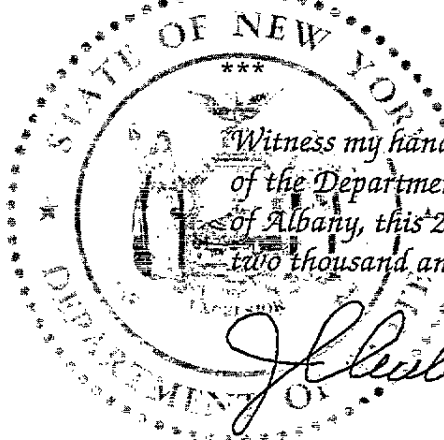
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I further certify, that no other documents have been filed by such Corporation.



Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 23rd day of February  
two thousand and one.

*[Signature]*

Special Deputy Secretary of State

200102260136 46

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SECRETARY OF STATE  
ALBANY, N.Y.