

CT CORPORATION SYSTEM

F01000004655

CORPORATION(S) NAME

Comprehensive Receivables Group, Inc.

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FILED
AUG 31 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- | | | |
|---|---|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input checked="" type="checkbox"/> Foreign qualification | <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Other |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Change of RA |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Photocopies | | |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

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Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

8/24/01

Order#: 4733959

Ref#:

Amount: \$

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 AUG 31 PM 4:25
NOTED FOR
TO ADDITIONAL
SUFFICIENCY OF FILING

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

JK

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-09/04/01--01006--002
*****70.00 *****70.00

**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. Comprehensive Receivables Group, 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 natural person or partnership if not so contained in the name at present.)
2. Michigan 3. 39-1462554
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 01/11/1989 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "Perpetual")
6. upon qualification
(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. 5815 East Clark Road, Bath, MI 48808
(Principal office address)

P. O. Box 2503 East Lansing, MI 48826
(Current mailing address)

All purposes stated in the Articles of Incorporation and any other legal purposes

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 or Mail Drop Box **NOT** acceptable)

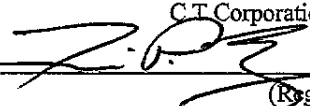
Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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.

By:  Francis P. Regan
(Registered agent's signature) 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

SEE ATTACHMENT

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Michael E. Bernstein

Address: 401 West Michigan Street

Milwaukee, WI 53203

Director: Gail L. Hanson

Address: 401 West Michigan Street

Milwaukee, WI 53203

B. OFFICERS

President: Michael T. Homant

Address: 5815 East Clark Road

Bath, MI 48808

Vice President: Gail L. Hanson

Address: 401 West Michigan Street

Milwaukee, WI 53203

Secretary: Michael E. Bernstein

Address: 401 West Michigan Street Milwaukee, WI 53203

Treasurer: Gail L. Hanson

Address: 401 West Michigan Street Milwaukee, WI 53203

SEE ATTACHMENT

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

13. 

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

14. Michael E. Bernstein, Secretary

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

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TALLAHASSEE, FLORIDA

Attachment to Florida

Application By Foreign Corporation for Authorization to Transact Business in Florida

Officers & Directors

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01 AUG 31 PM 4:30
TALAMASSEE, FLORIDA
SECRETARY OF STATE

1. Full Name: Thomas R. Hefty
Officer/Director: Officer
Officer's Title: CEO
Business Address: 401 West Michigan Street
City: Milwaukee
State: WI
ZIP Code: 53203
2. Full Name: Michael E. Bernstein
Officer/Director: Officer, Director
Officer's Title: COO/Secretary
Business Address: 401 West Michigan Street
City: Milwaukee
State: WI
ZIP Code: 53203
3. Full Name: Gail L. Hanson
Officer/Director: Officer, Director
Officer's Title: Vice President/Treasurer
Business Address: 401 West Michigan Street
City: Milwaukee
State: WI
ZIP Code: 53203
4. Full Name: Michael T. Homant
Officer/Director: Officer, Director
Officer's Title: President/Assistant Treasurer
Business Address: 5815 East Clark Road
City: Bath
State: MI
ZIP Code: 48808
5. Full Name: Ronald R. Kochanski
Officer/Director: Officer
Officer's Title: Assistant Secretary
Business Address: 5815 East Clark Road
City: Bath
State: MI
ZIP Code: 48808
6. Full Name:
Officer/Director:
Business Address:
City:
State:
ZIP Code:

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Comprehensive Receivables Group, 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:

(Name of Person)

(Firm/Company)

(Address)

(City/State and Zip code)

For further information concerning this matter, please call:

_____ at (_____) _____
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

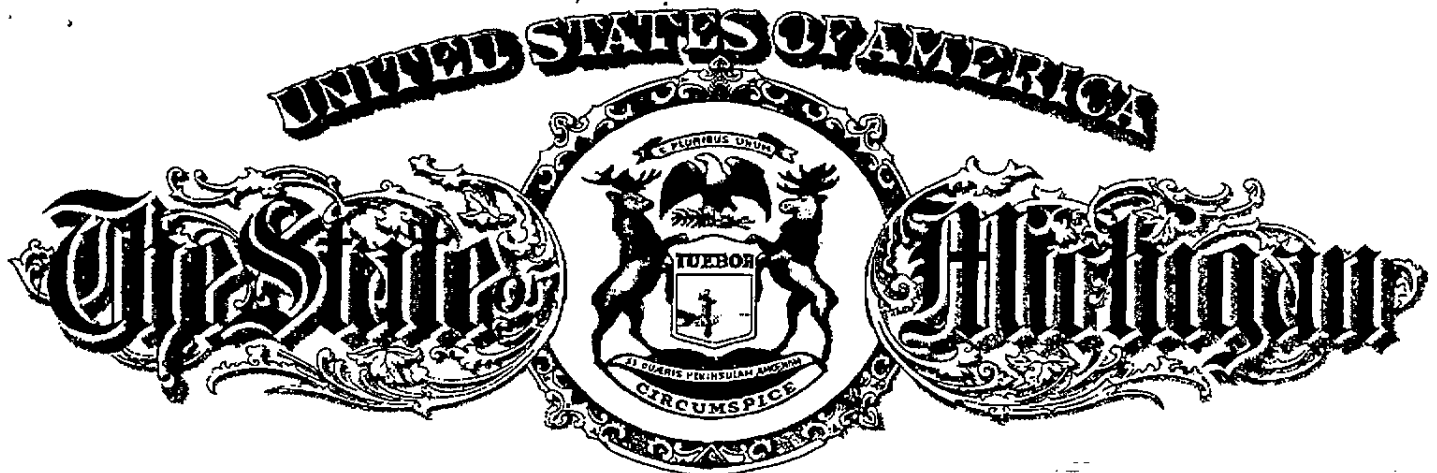
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

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



Michigan Department of Consumer and Industry Services

Lansing, Michigan

This is to Certify That

COMPREHENSIVE RECEIVABLES GROUP, INC.

was validly incorporated on January 11, 1989, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business or conduct affairs in Michigan and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 31st day of May, 2001

Andrew S. Mett, Director

Bureau of Commercial Services