

FO1000004987

HRA FINANCIAL SERVICES OF NORTH CAROLINA, INC.

13730 S. POINT BLVD
CHARLOTTE, NC 28273

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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-09/21/01--01010--008
190.00 **70.00

To Whom It May Concern:

Enclosed you will find our completed *Application by Foreign Corporation for Authorization to Transact Business in Florida* and two *Applications for Registration of Fictitious Name*.

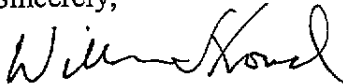
You will also find our check and our Certificate of Existence.

Please send any correspondence regarding this filing to:

Steve Bass
HRA Financial Services of North Carolina, Inc.
13730 S. Point Blvd
Charlotte, NC 28273

If you have any questions regarding this application, please contact Catherine Ramstad at (952) 928-8000 ext. 232.

Sincerely,



William Stroud
President

WS/cr

Enclosures

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

untw

TELEPHONE: (704) 941-6040

FAX: (704) 940-1661

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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. HRA FINANCIAL SERVICES OF NORTH CAROLINA, 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. NC (State or country under the law of which it is incorporated) 3. 56-1871862 (FEI number, if applicable)

4. 4/21/94 (Date of Incorporation) 5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))

7. 13730 SOUTH POINT BLVD
CHARLOTTE, NC 28273 (Current mailing address)

8. THIRD-PARTY DEBT COLLECTIONS
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box acceptable)

Name CT CORPORATION SYSTEM

Office Address: 1200 SOUTH PINE ISLAND ROAD

PLANTATION, Florida, 33324
(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.

Thomas R. Bednar
(Registered agent's signature)
Thomas R. Bednar, Asst. Secy.

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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NOT
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors: (Street address **ONLY** – P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only-P.O. Box NOT acceptable)

Chairman: NONE

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only-P.O. Box NOT acceptable)

President WILLIAM STROUD

Address: 13730 SOUTH POINT BLVD

CHARLOTTE, NC 28273

Vice President NONE

Address: _____

Secretary WILLIAM HOUSER

Address: 13730 SOUTH POINT BLVD

CHARLOTTE, NC 28273

Treasurer: JOHN GEORGIUS

Address: 13730 SOUTH POINT BLVD

CHARLOTTE, NC 28273

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

13. 

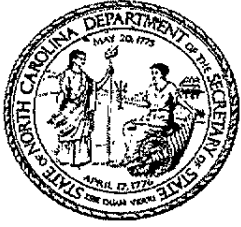
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. WILLIAM STROUD, PRESIDENT

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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NORTH CAROLINA

Department of The Secretary of State

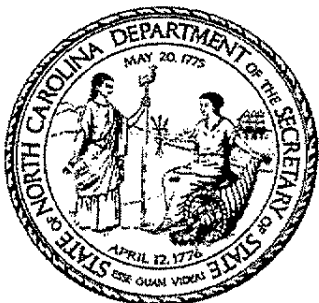
CERTIFICATE OF EXISTENCE

I, **ELAINE F. MARSHALL**, Secretary of State of the State of North Carolina, do hereby certify that

HRA FINANCIAL SERVICES OF NORTH CAROLINA, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 21st day of April, 1994, with its period of duration being Perpetual.

I **FURTHER** certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 **has been** delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

IN WITNESS WHEREOF, I have hereunto
set my hand and affixed my official seal at the
City of Raleigh, this 12th day of September, 2001.

Elaine F. Marshall

Secretary of State