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(Business Entity Name)			
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12/19/02--01057--002 **87.50

W02-35783

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FILED 03 JAN 15 AM 11: 42 TAILANASSEE, FLORIDA

December 24, 2002

AYNUR TOTURGUL 1ST CONTINENTAL MORTGAGE 1040 BAYVIEW DR. #610 FT. LAUDERDALE, FL 33304

SUBJECT: DEBT SOLUTIONS, INC. Ref. Number: W02000035783

We have received your document for DEBT SOLUTIONS, 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:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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) 245-6094.

Letter Number: 002A00067315

Agnes Lunt Document Specialist

TRANSMITTAL LETTER

FILED
03 JAN 15 AAH: 42

Division of Corpora			FALLANDSEE, FLORID
SUBJECT: <u>Del</u>		S INC.	
Dear Sir or Madam:	` ·	,	
The enclosed "Application b "Certificate of Existence", as to transact business in Florid	nd check are submitted to	r Authorization to Transac register the above referen	et Business in Florida", ced foreign corporation
Please return all corresponde	ence concerning this matt	er to the following:	
Arnur	1 Totarac	el	
		of Person)	
1S+	Continenta	1 Mortage	
	(Firm/C	ompany)	<u> </u>
1040	BAyview D	or # 610	
-	(Adi	lress)	en e
Ft. [Audordale		304
	(City/State	and Zip code)	
For further information conc	orning this matter places	call	
of tubbles unormation conce	trang mis mater, prease	can.	
RAYMOND HO	A-12 at (95N) 5666-0661	
(Name of Person)	(Area	Code & Daytime Telepho	ne Number)
STREET ADDRESS: Registration Section Division of Corporations 109 E. Gaines St.		MAILING ADDRESS: Registration Section Division of Corporation P.O. Box 6327	
Fallahassee, FL 32399		Tallahassee, FL 32314	
Enclosed is a check for the fo	llowing amount:		
	378.75 Filing Fee & Certificate of Status	3 \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status &

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03 JAN 15 AM 11: 42

ALLANGSOFE FLORIDA

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned Raymond Mosts (Name)	, do hereby certify
that this Resolution of the Board of Directors of Debt Solu	tions
(Corporate Name)	
a corporation duly organized and existing under the laws of the State of	nd.
was duly adopted on December 31, 2002	
Be it resolved, that Dobt Solutions (Corporate Name)	
(Corporate Name)	
organized and existing in the State of, here	by adopts the name
Debt Solutions Of America, INC	_ for use in Florida.
Dated: 12-31-02	•
Rignature of either Chairman, Vice Chairman of any of	ficer
Type or print name	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

PLOSICIA LA LA COMPANIA DE CAMPA DE CAM
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDALIN 15 AM 11: 42
1. DODE Solutions, Tuc.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" of All ASSET FROM A
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 MARY AND 3. WA-1564303 (State or country under the law of which it is incorporated) (FEI number, if applicable)
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4
4. 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 1040 BAULIOUS NR. # MAD Ft. LAUDORONO FT 3330N
7. 1040 BAyview Dr. #420 Ft. Lauderdale FL 33304 (Principal office address)
SAME AS Above
(Current mailing address)
8. Chedit Counseling
(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: INGER GARCIA
Office Address: 1000 BAYVicus DR #608
Ft. LAuderdale, FL, Florida 33304
(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.

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

A. DIRECTORS	FILED
Chairman:	03 JAN 15 AH11: 42
Address:	GEOGRANI OF STATE
	r _
/ice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
Address: 1040 BAYVIEW NR. #400	
ecretary:	
ddress:	····
reasurer:	
ddress:	
NOTE: If necessary, you may attach an addendura to the application listing add	
(Signature of Chairman, Vice Chairman, or any officer listed in a	number 12 of the application)
4. KAYHOND MOATZ KRESIDON	<u></u>

STATE OF MARYLAND

Department of Assessments and Taxation

FILE

03 JAN 15

I, PAUL ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE CONTROL STATE OF MARYLAND, DO HERBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT DEBT SOLUTIONS, INC. IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS DECEMBER 11, 2002.

Paul B. Anderson Charter Division

Paul B. Under

301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097

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