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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

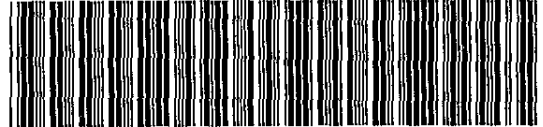
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2004 JUL 12 PM 3:24  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BROWN JUL 15 2004

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: River Collection & Recovery Service, Inc.  
(Name of corporation - must include suffix)

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2004 JUL 12 PM 3:25  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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:

Michael Larson

(Name of Person)

River Collection & Recovery Service, Inc.

(Firm/Company)

19230 Evans Street, Suite 111

(Address)

Elk River MN 55330

(City/State and Zip code)

For further information concerning this matter, please call:

Mike Larson

(Name of Person)

at (763) 633-6030

(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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

July 1, 2004

LISA REEVES  
NATIONAL REGISTERED AGENTS, INC.  
10985 CODY STREET, STE. 118  
OVERLAND PARK, KS 66210

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2004 JUL 12 PM 3:25  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for RIVER COLLECTION & RECOVERY SERVICE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$35.<sup>00</sup>

Only received 1st page of form.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Joey Bryan  
Document Specialist

Letter Number: 504A00042758

**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. River Collection & Recovery Service, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- N/A  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Minnesota 3. 73-1665374  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 4/9/2003 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. 19230 Evans Street, Suite 111, Elk River MN 55330  
(Principal office address)  
19230 Evans Street, Suite 111, Elk River MN 55330  
(Current mailing address)
8. collection agency/debt collection  
(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: NRAI Services, Inc.  
Office Address: 526 E. Park Avenue  
Tallahassee, Florida 32301  
(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.*  
NRAI Services, Inc.  
by: Lori Powers, Assistant Sec.  
(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:

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**A. DIRECTORS**

Chairman: Michael E. Larson

Address: 19230 Evans Street, Suite III  
Elk River MN. 55330

Vice Chairman: \_\_\_\_\_

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

Director: \_\_\_\_\_

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

Director: \_\_\_\_\_

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

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**B. OFFICERS**

President: Michael E. Larson

Address: 19230 Evans Street, Suite III  
Elk River MN 55330

Vice President: \_\_\_\_\_

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

Secretary: Terry Brockman

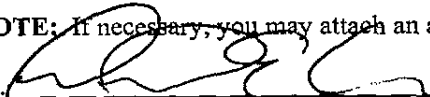
Address: 19230 Evans Street, Suite III, Elk River MN 55330

Treasurer: Danielle M. Larson

Address: 19230 Evans Street, Suite III, Elk River, MN 55330

**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.

Michael E Larson

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

State of Minnesota

## SECRETARY OF STATE

### Certificate of Good Standing

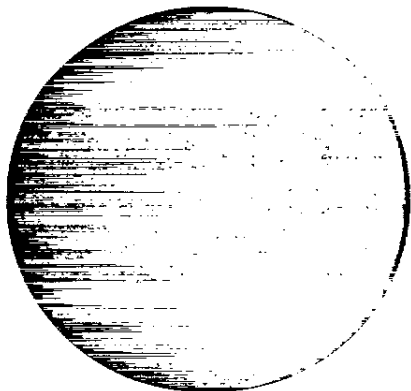
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: River Collection & Recovery Service, Inc.

Date Formed: 04/09/2003

Chapter Governed By: 302A

This certificate has been issued on 06/09/04.



*Mary Kiffmeyer*  
Secretary of State.