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Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 205-0383

f'rom:

Account Name : LORN DELIMAN, C.P.A.

Account Number : 119980000088 Phone : (305)279-8943

Fax Number : (305)271-4421

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IVISION OF CORPORA

## FOREIGN PROFIT QUALIFICATION

East Coast Credit Counselors, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing

Public Access Help.

J. BRMAN DEC 23 2004

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1 Bryan MAR - 9 2005

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### TRANSMITTAL LETTER

TO: Registration Sec Division of Corp			
_			
SUBJECT: East Coa	st Credit Counselors, Inc. (Name of corpora	ation - must include suffix)	
Dear Sir or Madam:		·	
The enclosed "Applicati" "Certificate of Existence transact business in Flor	;" and check are submitted t	for Authorization to Transacto register the above reference	t Business in Florida," red foreign corporation to
Picase return all correspond	ondence concerning this ma	tter to the following:	, <u>u</u> ~
Irv Joseph			5 8
1100000	(Name	of Person)	DZ B
East Coast Credit Couns	seiors, Inc.		黄粱 子
	(Firm/	Company)	SSE O
19451 NE 17th Ave			
	(A	ddress)	© ₹ œ
Miami, FL 33139			공공 그
	(City/Sta	nte and Zip code)	75
	- A		•
For further information	concerning this matter, plea	sc call:	
Irv Joseph	at ( 305	796-9340	
(Name of Perso		ea Code & Daytime Telepho	one Number)
STREET ADD Registration Se Division of Cor 409 E. Gaines S Tallahassee, FL	etion porations st. . 32399	MAILING AI Registration S Division of Co P.O. Box 6327 Tallahassoe, F	ection orporations 7
Enclosed is a check for	the following amount:		
☐ \$70.00 Filing Fcc	27 \$78,75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	<ul> <li>\$87.50 Filing Fee, Certificate of Status &amp; Certified Copy</li> </ul>
	£ £ £ 10 £ 10 £ 10 £ 10 £ 10 £ 10 £ 10	ነኛስ199 <b>3</b> ነነነ	



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

December 23, 2004

LORN LEITMAN, C.P.A.

,

SUBJECT: EAST COAST CREDIT COUNSELORS, INC.

REF: W04000046765



We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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 FAX Aud. #: H04000250122 Letter Number: 204A00071215

409 É Connes St Tallahasses 32399 (((H04000250122 3)))

#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

				STATUTES, THE POLLOWING IS SUBMITTE BUSINESS IN THE STATE OF FLORIDA.	205 HAR	
T East Co	asi Cred	K Counselors, Inc.			一至 苦	
		poration; must inchide "INCORPORAT p," "Inc," "Co." or "Corp.")	ΕD	," "COMPANY," "CORPORATION,"	R-8	
					开写 3	è
(if name	mevailab	le in Florida, enter ulternate corporate na	m	adopted for the purpose of transacting business in		ņ
•		•			62°	•
Z. Delawa		der the law of which it is incorporated)	_3.	20-2027155 (FEI number, if applicable)	<del>- 3</del> 5	
	-	•			D F	
4. Decemi	ber 8, 200	incorporation)	\$	Perpetual		
	•	• • • • • • • • • • • • • • • • • • • •		(Duration: Year corp. will cease to most or "per	perturat .)	
6. Decem	ber 9, 20					
		(Date first transacted busine (SEE SECTIONS 607 1501 & 60	7	n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
7, 19451 N	E 17th A	e, Miami, FL 33130				
		(Principal office	ack	irens)		
19451 N	E 17th A	ve., Miami, FL 32139		•		
		(Current mathog	ā	irose)		
a. Arry low	ful act or	mctivity				
(P)	игрозе(з)	of corporation authorized in home state of	)r o	ourney to be carried out in state of Florids)		
9. Namo a	nd <del>street</del> :	dram of Florida registered agent; (	æ.	O. Box <u>NOT</u> acosptable)		
N	KONG.	Irv Joseph	"			
Office Add	Inner	19451 NE 17th Ave	٠,			
CTTTC 14478				, , , , , , , , , , , , , , , , , , ,		
		Mani		, Plorida iv Joseph		
		(C#y)		(Zip code)		
Having best	en name: 'In this g	nulication. I haveby account the nobe	işt Ev	ice of process for the above stated corporation ment as registered agent and agree to act in the relative to the proper and complete performant polition as registered agent.	tis capacity. 🛴	÷
	_					
	4	(Registered agent's signat		1		
		Actualization stimum a sector	-24	ı		
f f Assemb	مه و دا اس	elificate of existence duly anthentics	tod	not more than 90 days prior to delivery of this	s application to	

the Department of State, by the Secretary of State or other official having ensured 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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A. DIR	ECTORS	
Chairman	Irv Joseph	
	19451 NE 17th Ave	
	Mlami, FL 38139	
Vice Cha	Duran:	- PE B
Address:		F-61 3
		ES T
Director		SSO T
Address.		州温宝
,	•	ियु छ
		65 S
Director		
Address,		
		· · · · · · · · · · · · · · · · · · ·
B. OFF	ICERS	
	. Irv Joseph	
Address:	19451 NE 17IN AV4	
	Milemi, FL 33199	
Vice Pres	ident.	
Address:		
		· · · · · · · · · · · · · · · · · · ·
Southtry	. Inv Juseph	·
Addrasa:	19451 NE 17th Ave. Miemi, FL 33139	·
Transmirer	. Inv Joseph	
	19451 NE 17th Ave., Marni, FL 38139	
NOTE:	If necessary, you may stack on addendum to the application listing additional officers and/or	directors.
I3		•
<u>.</u>	Agrange of Lirector or Officer listed in number 12 of the application)	
14. <u>lev.</u>	Joseph, President (Typed or printed name and capacity of person signing application)	
	(((\u00e4000350122-3)))	

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# Delaware

PAGE 1

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EAST COAST CREDIT COUNSELORS, INC."

IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF MARCH, A.D. 2005.

2005 HAR -8 AM 8: 17
DIVISION OF CORPORATIONS



Variet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3718300

DATE: 03-03-05

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