

T098888888474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

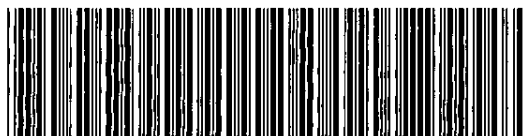
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2-5-09
WV



January 29, 2009

Florida Secretary of State
New Filing Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Foreign Corporation Application to Transact Business

To Whom it May Concern,

Enclosed are the application materials, an Authenticated Certificate of Good Standing, a prepaid postage return envelope and the Filing Fee of \$70.00.

If you need anything further in regard to this matter, please contact me at (970) 867-8521 *211.

Regards,

A handwritten signature in black ink, appearing to be "James H. Therrell, IV, Esq.", is written over the typed name.

James H. Therrell, IV, Esq.
Corporate Counsel
Affiliated Credit Services, Inc.
830 E. Platte Ave.
Fort Morgan, CO 80701
jamest@acscollects.com
(970) 867-8521

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TALLAHASSEE, FL

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: AFFILIATED CREDIT SERVICES, INC.
(Name of corporation - must include suffix)

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2000 FEB -4 A 11:51
SECRETARY OF STATE
TALLAHASSEE, FL 32314

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:

James H. Therrell, IV, Corporate Counsel
(Name of Person)
Affiliated Credit Services, Inc.
(Firm/Company)
830 E. Platte Ave. Ste. A
(Address)
Ft Morgan, CO 80701
(City/State and Zip code)

For further information concerning this matter, please call:

James Therrell at (970) 867-8521 #211
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing 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

**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. **AFFILIATED CREDIT SERVICES, INC.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

A.C. Services, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **Colorado**

(State or country under the law of which it is incorporated)

3. 84-1440302

(FEI number, if applicable)

4. **10/03/1997**

(Date of incorporation)

5. **Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

6. _____

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 830E. Platte Ave., Ste. A, Fort Morgan, CO 80701

(Principal office address)

830E. Platte Ave., Ste. A, Fort Morgan, CO 80701

(Current mailing address)

8. Collection of Consumer debt

(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 NOT acceptable)

Name: Incorp Services, Inc.

Office Address: 17888 67th Court North

Loxahatchee, Florida 33470

(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.

Janice Hull on behalf of Incorp Services, Inc.

(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.

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CALIFORNIA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Matt Laws

Address: 7 Garvie Ct.

Ft Morgan, CO 80701

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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. Matt Laws, President

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

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE

I, Bernie Buescher, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

AFFILIATED CREDIT SERVICES, INC.

is a **Corporation** formed or registered on 10/03/1997 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 19971158949.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 01/23/2009 that have been posted, and by documents delivered to this office electronically through 01/29/2009 @ 09:25:29.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 01/29/2009 @ 09:25:29 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 7281117.



Bernie Buescher

Secretary of State of the State of Colorado

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*****End of Certificate*****

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click Business Center and select "Frequently Asked Questions."