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FLORIDA DEPARTMENT OF STATE JUL - 7 AM 9: 27 Division of Corporations

June 25, 2009

IRENE SINAYSKAYA 49 SATTERLEE ST. STATEN ISLAND, NY 10307

SUBJECT: RENAISSANCE CREDIT SOLUTIONS, INC.

Ref. Number: W09000029443

We have received your document for RENAISSANCE CREDIT SOLUTIONS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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) 245-6062.

Eula Peterson Regulatory Specialist II

Letter Number: 109A00021583

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bran specified.

C. RECTURA

COVER LETTER

Division of Corporations	
SUBJECT: Renaissance Credit S	Solutions, Inc.
Name of c	corporation - must include suffix
Dear Sir or Madam:	
	oration for Authorization to Transact Business in Florida," omitted to register the above referenced foreign corporation to
Please return all correspondence concerning	this matter to the following:
<u>Ir</u>	ene Sinayskaya
•	Name of Person
Renaissar	nce Credit Solutions, Inc.
	Firm/Company
49	Satterlee Street
	Address
State	n Island, NY 10307
**************************************	City/State and Zip code
Renaissa	ncecredit@hotmail.com
	to be used for future annual report notification)
For further information concerning this matte	er, please call:
Irene Sinayskaya	718 915-0750
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 amoun	t:
\$70.00 Filing Fee \$78.75 Filing Fee Certificate of S	

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. Renaissance Credit Solutions, Inc.		
(Enter name of corporation; must include "INCORPORATE." Inc.," "Co.," "Corp," "Ine," "Co," or "Corp.")	D," "COMPANY," "CORPORATION,"	
Renaissance Credit, Inc.		
(If name unavailable in Florida, enter alternate corporate name	ne adopted for the purpose of transacting business in Florida)	
2. New York	3 NONE	
(State or country under the law of which it is incorporated)	(FEI number, if applicable)	
4 2/18/2009	s Perbetual Fill = 1	
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
6. NONE		
	s in Florida, if prior to registration)	
(SEE SECTIONS 607.1501 & 607.	.1502, F.S., to determine penalty liability)	
7. 49 Satterlee Street, Staten Island, NY 10307	31	
(Principal office ad	ddress)	
SAME		
(Current mailing ac	ddress)	
8. Business expansion		
(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	P.O. Box NOT acceptable)	
Name: Bon's SingySky		
Office Address: 301 174th Street, Uni+805 Sunny Is les , Florida 33160 (City) (Zip code)		
Sunny Is les Florida 33160		
(City)	(Zip code)	
designated in this application, I hereby accept the appoin	vice of process for the above stated corporation at the place tment as registered agent and agree to act in this capacity. I s relative to the proper and complete performance of my duties	
and I am familiar with and accept the obligations of my p		
GRegistered egent's signature	e)	
11. Attached is a certificate of existence duly authenticate	d, 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 Chairman: ____ Address: Vice Chairman: ____ Address: _____ Director: Address: Director: Address: **B. OFFICERS** NY 10307 Vice President: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director of Officer listed in number 12 of the application)

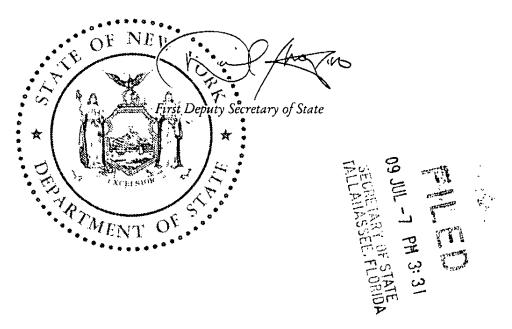
(Typed or printed name and capacity of person signing application)

14. Irene Sinayskaya

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of RENAISSANCE CREDIT SOLUTIONS, INC. was filed on 02/18/2009, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 08th day of June two thousand and nine.



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