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2010 MAR -3 P 2:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR -4 2010  
D.A. WHITE

**Alliance Collection Service, Inc.**

**600 W. Main Street, Suite A  
Tupelo, MS 38801**

State of Florida  
FL Reg Section Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**RE: Alliance Collection Service, Inc.**

To Whom It May Concern:

Enclosed you will find our completed application.

Please mail all correspondence to:

Ken Dulaney  
Alliance Collection Service, Inc.  
PO Box 49  
Tupelo, MS 38802-0049

If you have any questions regarding this application, please contact:

Ken Dulaney  
Alliance Collection Service, Inc.  
Phone: (662) 841-9995  
Fax: (662) 841-9176  
Email: [kdulaney@alliancecollectionsservice.com](mailto:kdulaney@alliancecollectionsservice.com)

Enclosures



**COVER LETTER**

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**TO:** New Filing Section  
Division of Corporations

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**SUBJECT:** Alliance Collection Service, Inc

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" 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:

Ken Dulaney

Name of Person

Alliance Collection Service, Inc.

Firm/Company

600 W. Main Street, Suite A

Address

Tupelo, MS 38801

City/State and Zip code

kdulaney@alliancecollectionsservice.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ken Dulaney at ( 662 ) 841-9995

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

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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. MAR -3 P 2:36

1. Alliance Collection Service, Inc

SECRETARY OF STATE

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

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

2. Mississippi

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

3. 64-0858320

(FEI number, if applicable)

4. 03/27/1995

(Date of incorporation)

5. Perpetual

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

6. Upon Qualification

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

7. 600 W. Main Street, Suite A, Tupelo, MS 38801

(Principal office address)

PO Box 49, Tupelo, MS 38801

(Current mailing address)

8. 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 NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324

(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.*

C T Corporation System

By: Jeanne Nelson

(Registered agent's signature)

**Jeanne Nelson**  
**Assistant Secretary**

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** SEE ATTACHMENT

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

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

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

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

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

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

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

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

**B. OFFICERS** SEE ATTACHMENT

President: Jeffrey Lee Chambers

Address: 600 W. Main Street, Suite A  
Tupelo, MS 38801

Vice President: Herbert Graham Rogers, III

Address: 600 W. Main Street, Suite A  
Tupelo, MS 38801

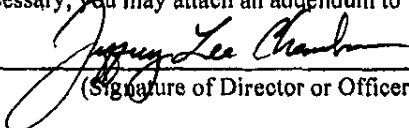
Secretary: Herbert Graham Rogers, III

Address: 600 W. Main Street, Suite A, Tupelo, MS 38801

Treasurer: Herbert Graham Rogers, III

Address: 600 W. Main Street, Suite A, Tupelo, MS 38801

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. Jeffrey L. Chambers, President/Director/Owner/Coll. Mgr  
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**Attachment to Florida  
Officers & Directors**

- |   |                   |  |                      |
|---|-------------------|--|----------------------|
| 1 | Full Name:        | Haley Celeste McLemore                   | SECRETARY OF STATE   |
|   | Officer/Director: | Officer                                  | TALLAHASSEE, FLORIDA |
|   | Officer's Title:  | CFO                                      |                      |
|   | Director's Title: |  |                      |
|   | Business Address: | 600 W. Main Street, Suite A              |                      |
|   | City:             | Tupelo                                   |                      |
|   | State:            | MS                                       |                      |
|   | ZIP Code:         | 38801                                    |                      |
| 2 | Full Name:        | Herbert Graham Rogers, III               |                      |
|   | Officer/Director: | Officer, Director                        |                      |
|   | Officer's Title:  | Vice President/Secretary/Treasurer/Owner |                      |
|   | Director's Title: | Director                                 |                      |
|   | Business Address: | 600 W. Main Street, Suite A              |                      |
|   | City:             | Tupelo                                   |                      |
|   | State:            | MS                                       |                      |
|   | ZIP Code:         | 38801                                    |                      |
| 3 | Full Name:        | Jeffrey Lee Chambers                     |                      |
|   | Officer/Director: | Officer, Director                        |                      |
|   | Officer's Title:  | President/Owner                          |                      |
|   | Director's Title: | Director                                 |                      |
|   | Business Address: | 600 W. Main Street, Suite A              |                      |
|   | City:             | Tupelo                                   |                      |
|   | State:            | MS                                       |                      |
|   | ZIP Code:         | 38801                                    |                      |

# State of Mississippi

Office of the Secretary of State  
C. Delbert Hosemann, Jr., Secretary of State  
Jackson, Mississippi

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## CERTIFICATE

I, C. DELBERT HOSEMAN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on March 27, 1995, the State of Mississippi issued a Charter/Certificate of Authority to:

ALLIANCE COLLECTION SERVICE, INC.

That the state of incorporation is MISSISSIPPI.

That the period of duration is perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.



Given under my hand  
and seal of office  
February 16, 2010

*C. Delbert Hosemann, Jr.*

C. Delbert Hosemann, Jr.  
Secretary of State