F1000000/467

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
1					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
3					

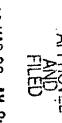




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03/22/10--01037--002 **78.75

SECRETARY OF STATE





COVER LETTER

TO:	New Filing Section Division of Corporations					
SUBJ	ECT: ILCA, Inc.					
Name of corporation - must include suffix						
Dear S	ir 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 matte	r to the following:				
Rosan	na Benhaddouch					
	Name of	Person				
ILCA, I	Inc.					
	Firm/Cor	npany				
223 Ea	ast Flagler St. Suite 238					
	Addı	ess				
Miami,	FL 33131					
	City/State a	and Zip code				
roxmed	d01@yahoo.com					
	E-mail address: (to be used	for future annual report n	otification)			
For fur	ther information concerning this matter, please	call:				
Rosanna Benhaddouch at (727) 348-5936						
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				
Enclose	ed is a check for the following amount:					
□ \$70	.00 Filing Fee	\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certificate of Status &			

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. IDALIA LLORE	IDALIA LLORENS COLLECTION AGENCY, INC.						
(Enter name of country "Inc.," "Co.," "C	corporation; must include "INCORPORATE Corp," "Inc," "Co," or "Corp.")	ΞD,	" "COMPANY," "CORPORATION,"	•	 -		
ILCA, INC.							
(If name unavail	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting busine	ss in Florid	ia)		
2. Puerto Rico		3.	66-0442290				
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)				
4. August 8, 198	6	5.	Perpetual				
(Date	e of incorporation)		(Duration: Year corp. will cease to exist or	"perpetual	<u>")</u>		
6. N/A							
	r St. Suite 238 Miami, FL 33131 (Principal office acceded Leon Suite 406 San Juan, PR 009) (Current mailing acceded to the state of t	909)	SECRI	io Mar		
8. Collection Agency				ASSEE (22		
(Purpose(s	s) of corporation authorized in home state of	r co	ountry to be carried out in state of Florida)	129 130 ±	1		
P. Name and street address of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)					8: 07		
Name:	Rosanna Benhaddouch	_	<u></u>				
Office Address:	223 E Flagler St. Suite 238						
	Miami		, Florida 33131				
	(City)		(Zip code)				

10. Registered agent's acceptance:

under the law of which it is incorporated.

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.

(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

FACE CONTROLLED



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

A. DIRECTORS	10 MAR 22 AM 8: 07
Chairman:	SECRETARY OF STATE
Address:	TALLAHASSEE, FLORIDA
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Idalia Llorens Santini	
Address: 1607 Ave Ponce de Leon Suite 406	
San Juan, PR 00909	
Vice President: Rosanna Benhaddouch	
Address: 300 S Biscayne Blvd Apt. 2508, Miami, FL 33131	
300 S Biscayne Blvd Apt. 2508, Miami, FL 33131	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional add	ional officers and/or directors.
13.	
14. Signature of Director or Officer listed in number 12 of the and the state of th	Vice Presidental Operations



APPHOYEL AND FILED

10 MAR 22 AM 8:07

SECRETARY OF STATE TALLAHASSEE, FLORIDA

San Juan, Puerto Rico

CERTIFICATE OF EXISTENCE

I, **KENNETH D. McCLINTOCK**, Secretary of State of the Commonwealth of Puerto Rico,

CERTIFY: That, according to our records "IDALIA LLORENS COLLECTION AGENCY, INC.", registration number 63955, is a profit corporation organized in accordance to the General Corporation Law of Puerto Rico on August 8, 1986.

This certification does not imply that this corporation has filed the annual reports, pursuant to the requirements of Article 15.03 of the General Corporation Act. If you need to know if such reports have been filed, you must request a Certificate of Good Standing.

IN WITNESS WHEREOF, I hereby sign and cause the Great Seal of the Commonwealth of Puerto Rico to be affixed on it, in the city of San Juan, today, March 12, 2010.

KENNETH D. McCLINTOCK

Secretary of State

KDMH/mara 0787967 \$10.00