# F1000004373

(Requestor's Name)  (Address)					
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Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
Kerth Kerbyson GAVE					
AUTHORIZATION BY PHONE TO					
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Division					
Office Hee Only					



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10/01/10--01013--004 \*\*70.00

SECUTION OF STATE



PS 10/5/10

### **COVER LETTER**

TO:	New Filing Se Division of Co			
SUB	JECT: <i>F1</i>	NANCIAL ACCOUNT	SERVICE TEN	an INC.
	·	(Name of corpo	ration - must include suffix	
Dear S	Sir or Madam:			
"Certi		tion by Foreign Corporation ce," and check are submitted orida.		
Please	return all corres	pondence concerning this ma	atter to the following:	
	NE.	TH KERBYSON (Nam		
	FINAN	CEMIL ACCOUNTS (Firm	SERVICE TEAM	INC.
		(Firm	/Company)	
	851	EXVILLE, TW. (City/St	IKE	
:		(1	Address)	
	KNO	XVILLE, TN:	37919	
		(City/St	ate and Zip code)	
For fu	rther information	concerning this matter, plea	ise call:	
1	LETTH KER	8450A at ( 80	(65) (693-760	60
	(Name of Pers	son) at ( <u>80</u>	rea Code & Daytime Telepl	none Number)
•				
	New Filing Sec Division of Co Clifton Buildir 2661 Executiv Tallahassee, Fl	rporations ag e Center Circle L 32301	MAILING A New Filing S Division of C P.O. Box 632 Tallahassee, I	ection Forporations 17
Enclos	sed is a check for	the following amount:		
<b>12</b> \$7	0.00 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.

· · ·	Financial Accounts Service Team, Inc.					
(Enter name of a "Inc.," "Co.," "C	corporation; must include "INCORPORATE Corp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"				
(If name unavai	lable in Florida, enter alternate corporate na	me adopted for the purpose of transacting business	s in Florida)			
2 T	ENNESSEE	2 62-1292520				
(State or country	under the law of which it is incorporated)	3. <u>62 - 129 25 20</u> (FEI number, if applicable)				
4.	8/22/1986	5 PERPETUAL				
(Date	of incorporation)	5. PERPETUAL  (Duration: Year corp. will cease to exist or "	perpetual")			
6		NIA				
	(Date first transacted busines (SEE SECTIONS 607.1501 & 607	s in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)				
7	8300 KINGSTON PIK (Principal office a	E, KNOXVILLE, TN 37 ddress)	919	10 0		
	SANE AS ABOVE			- 130 (		
	SANE AS ABOVE (Current mailing a	ddress)	一選章	-		
8	COLLECTIONS	country to be carried out in state of Florida)	E S	PH		
(Purpose(s	s) of corporation authorized in home state or	country to be carried out in state of Florida)	35	2: 19		
9. Name and stree	et address of Florida registered agent: (F	O.O. Box NOT acceptable)	E+111	\O		
Name:	C T Corporation System					
Office Address:	1200 South Pine Island Road					
	Plantation	, Florida 33324 (Zip code)				
•	(City)	(Zip code)				
Having been nam designated in this further agree to co	application, I hereby accept the appoin	vice of process for the above stated corporat timent as registered agent and agree to act in relative to the proper and complete perform position as registered agent.	i this capaci	ty. I		
By:	C T Corporation System	Michele Miller Assistant Secretary				
37. A	(Registered agent's signature	9}				

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.

# A. DIRECTORS Chairman: \_\_\_\_\_ Address: \_\_\_\_\_ Vice Chairman: Address: Director: \_\_ Address: Director: Address: B. OFFICERS President: PHILIP KNIGHT Address: 8300 KINGSTON PIKE KNOXVILLE, TN 37919 Vice President; Address: Secretary: WILLIAM KNIGHT Address: 1717 WINSTON ROAD KNOXVILLE, TN 37919 Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 13. (Signature Director or Officer listed in number 12 of the application)

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

PHILLIP KNIGHT PRESIDENT

14. \_\_\_\_\_



## STATE OF TENNESSEE Tre Hargett, Secretary of State

Division of Business Services 312 Rosa L. Parks Avenue 6th Floor, William R. Snodgrass Tower Nashville, TN 37243

#### FINANCIAL ACCOUNTS SERVICES TEAM, INC

8300 KINGSTON PIKE Knoxville, TN 37919

September 16, 2010

Request Type: Certificate of Existence/Authorization

Issuance Date: 09/16/2010

Request #:

0021248

Copies Requested:

**Document Receipt** 

Receipt #: 251531

Filing Fee:

\$20.00

Payment-Check/MO - FINANCIAL ACCOUNTS SERVICES TEAM, INC, Knoxville, TN

\$20.00

Regarding:

FINANCIAL ACCOUNTS SERVICE TEAM, INC.

Filing Type:

Corporation For-Profit - Domestic

Charter/Qualification Date: 08/22/1986

Status:

Active

**Duration Term: Perpetual** 

Control #:

176971 08/22/1986

Date Formed: Formation Locale: Knox County

Inactive Date:

#### **CERTIFICATE OF EXISTENCE**

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

#### FINANCIAL ACCOUNTS SERVICE TEAM, INC.

- \* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- \* has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business:
- \* has filed the most recent corporation annual report required with this office;
- \* has appointed a registered agent and registered office in this State;

\* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

> Tre Hargett, Secretary of State **Business Services Division**

Processed By: Sheila Keeling