

(Requestor's Name)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	٦
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110-45870

COVER LETTER

TO: New Filing Section Division of Corporations							
SUBJECT: Revenue Recovery Consul	tants.	Inc.					
	***************************************		on - mu	st include suffix	ς)		
Dear Sir or Madam:							
The enclosed "Application by Foreign Con" "Certificate of Existence," and check are su transact business in Florida.							
Please return all correspondence concerning	g this i	matte	to the	following:			
	Ji	anet T	eague				
•	(Na	me o	f Person	n)			
	Come	rston	Suppo	ort, Inc.			
	(Fir	m/Co	mpany)			
11	111 H	ouze	Rd., Su	ite 200			
		(Add	ress)				
	Rosw	ell, G	A 3001	76			
	(City/	State	and Zip	code)			
For further information concerning this man	•	ease (call:	587-4595	2010 7. 7. 7.		
(Name of Person)	, /) Code &		hone Number)		
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:				MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
\$70.00 Filing Fee \$78.75 Filing F	ee &			5 Filing Fee & fied Copy	\$87.50 Filing Fee, Certificate of Status Certified Copy		



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

September 24, 2010

Florida Division of Corporations,

Please find enclosed the Certificate of Authority application and fee for Revenue Recovery Consultants, Inc. The check for filing fee includes the certified copy fee. Please note that I have included a self addressed stamped envelope for your convenience for return proof of filing. They have hired Cornerstone Support, Inc. to file this on their behalf. If you have any questions, please feel free to call me at 770-587-4595.

Please mail any correspondence to: Cornerstone Support, Inc. Attn: Janet Teague 11111 Houze Rd, Suite 200 Roswell, GA 30076

CONFIDENTIALITY NOTICE

This submission and any attachments contain information from Cornerstone Support, Inc. and are intended solely for the use of the named recipient or recipients. This submission may contain privileged or confidential communications. Any dissemination of this submission by anyone other than an intended recipient is strictly prohibited. If you are not a named recipient, you are prohibited from any further viewing of the information or any attachments or from making any use of the information or attachments. If you believe you have received this information in error, notify the sender immediately and permanently destroy the information, any attachments, and all copies thereof.

Sincerely,

Janet Teague

Licensing Specialist

Cornerstone Support, Inc.

Roswell, Georgia 30076



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

October 06, 2010

Dear Ruby Dunlap,

Please find enclosed the Certificate of Authority application for Revenue Recovery Consultants, Inc. with adopted name Revenue Recovery Consultants, Inc. of Virginia. Per your letter the check for filing fee totaling \$78.75 has been received. Please reference Number W10000045870. Please note that I have included a self addressed stamped envelope for your convenience for return proof of filing. They have hired Cornerstone Support, Inc. to file this on their behalf. If you have any questions, please feel free to call me at 770-587-4595.

Please mail any correspondence to: Cornerstone Support, Inc. Attn: Janet Teague 11111 Houze Rd, Suite 200 Roswell, GA 30076

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Sincerely,

Janet Teague

Licensing Specialist

Cornerstone Support, Inc.

11111 Houze Road Suite 200

Roswell, Georgia 30076

www.camport.com

770.587.4595 Fax 770.587.2440



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 30, 2010

JANET TEAGUE CORNERSTONE SUPPORT, INC. 11111 HOUZE RD, SUITE 200 ROSWELL, GA 30076

SUBJECT: REVENUE RECOVERY CONSULTANTS, INC.

Ref. Number: W10000045870

We have received your document for REVENUE RECOVERY CONSULTANTS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap Regulatory Specialist II

Letter Number: 310A00023277

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.	Revenue Reco	very Consultants, Inc.							
	(Enter name of co	rporation; must include "I	INCORPORATI	ED,	" "COMPA	NY," "CORPOR	ATION,"		
		rp," "Inc," "Co," or "Corp							
	, , ,		,						
	Revenue Recov	ery Consultants, Inc	. of Virginia	а.					
								in Clasi	
	(11 name unavanat	ole in Florida, enter altern	ate corporate na	me	adopted for i	ine purpose or tra	nsacting ousmes	SIBFION	uaj
	774			-	54107527	7			
Z.	VA			٥.	54187537				
	(State or country u	nder the law of which it is	s incorporated)			(FEI number,	if applicable)		
	10/02/1005			_	ъ				
4,	12/03/1997			5.	Perpetual				
	(Date o	of incorporation)			(Duration:	Year corp. will c	ease to exist or "	perpetua	l'')
6.	upon qualificati	on							
		(Date first tr	ansacted busine	ss ii	ı Florida, if p	rior to registratio	n)		
		(SEE SECTIONS	607.1501 & 60	7.15	02, F.S., to o	determine penulty	liability)		
		,					•		
7.	3541 Chain Brid	lge Road, Suite 209	Fairfax		VA	22030			
•			Principal office	nddi	ress)				
		(-	· ·····e··p···· o·····eo						
			Current mailing	add	recci				
		(1	outen maning	auu	icas)				
8	Debt Collection	On.							
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	(Purpose(s)	of corporation authorized	in nome state o	r co	untry to be c	arrica out in state	of riorida)-	8	""I"
_							ייים אוניים אוניים אוניים אוניים	000	4
9.	Name and street	address of Florida regis	stered agent: (P.C). Box <u>NO l</u>	_acceptable)			6 of 1800 of
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	Name:	Corporation Service C	ompany				E ~		4 2
								ט	e ·
\circ	ffice Address:	1201 Hays Street					ر در در		
	****** * ******************************						25	ふ	
		Tallahassee			Ela-	da _32301	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 4	
		y when a			, Fiori	****	-	W	
		(Cit	y)			(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.

(Registered agent's signature)

Lynn Cannelongo, Assistant VP

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. DIR	RECTORS		
Chairma	n:		
Address:			
Vice Cha	nirman:		
Address:			
ra.·	Frances E. Fisher		
Director:	3541 Chain Bridge Road, Suite 209		
	Fairfax, VA 22030		
Director:	Steven C. Fisher		
Address:	3541 Chain Bridge Road Suite 200		
	Fairfax, VA 22030		
B. OFF	ICERS	end .	
President	Frances E. Fisher	3150 SEC 280	ment Time
Address:	3541 Chain Bridge Road, Suite 209	18 8 1	ALL PARTS
	Fairfax, VA 22030	13.52 1-22.52	1:1
Vice Pres	rident: Steven C. Fisher	= 7	U
Address:	35/1 Chain Bridge Boad, Suite 200	75.5	
	Fairfax, VA 22030		Vol
Secretary			
Address:	3541 Chain Bridge Road, Suite 209, Fairfax, VA 22030		
Treasurer			···
Address:			
NATE.	If monograms years many attack are added down to the country of a 15 of 15	44 42	
	If necessary, you may attach an addendum to the application listing additional officer	s and/or directors	S.
13	(Signature of Director or Officer listed in number 12 of the application)		
14. F	Frances E. Fisher President		
- ''	(Typed or printed name and capacity of person signing application)		

Common wealth of Hirginia



State Corporation Commission

I Certify the Following from the Records of the Commission:

REVENUE RECOVERY CONSULTANTS, INC. is a corporation existing under and by virtue of the laws of Virginia, and is in good standing.

The date of incorporation is December 03, 1997.

Nothing more is hereby certified.

200 OCT -1 P 2 43



Signed and Sealed at Richmond on this Date: September 21, 2010

Joel H. Peck, Clerk of the Commission