

F14000000728

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MD 2/18

Merchants Credit Corporation

**2245 152nd Ave. NE
Redmond, WA 98052-5519**

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

RE: Merchants Credit Corporation

To Whom It May Concern:

Enclosed you will find our completed application.

Please mail all correspondence to:

Richard Nystrom
Merchants Credit Corporation
PO Box 7416
Bellevue, WA 98008-1416

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

Richard Nystrom
Merchants Credit Corporation
Phone: (425) 643-2613 ext. 226
Fax: (425) 643-8546
Email: rnystrom@merchantscredit.com

Enclosures

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Merchants Credit Corporation

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:

Richard Nystrom

Name of Person

Merchants Credit Corporation

Firm/Company

2245 152nd Ave. NE

Address

Redmond, WA 98052

City/State and Zip code

rnystrom@merchantscredit.com

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

For further information concerning this matter, please call:

Richard Nystrom

Name of Person

at (425) 643-2613

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**

*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.*

14 FEB 14 PM 3:10
STATE
OF FLORIDA
SECRETARY

1. Merchants Credit Corporation

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"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. Washington

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

3. 91-6028830

(FEI number, if applicable)

4. 12/28/1954

(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. 2245 152nd Ave. NE, Redmond, WA 98052

(Principal office address)

PO Box 7416, Bellevue, WA 98008

(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: Michele Miller

Michele Miller
Assistant Secretary

(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 under the law of which it is incorporated.

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

A. DIRECTORS

Chairman: N/A

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: David Quigley

Address: 2245 152nd Ave. NE

Redmond, WA 98052

Vice President: Sofia Quigley

Address: 2245 152nd Ave. NE

Redmond, WA 98052

Secretary: Carol Taylor

Address: 2245 152nd Ave. NE, Redmond, WA 98052

Treasurer: Scott Wiswall

Address: 2245 152nd Ave. NE, Redmond, WA 98052

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Jeff Schoenberg, Attorney-in-Fact

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

FILED
14 FEB 14 PM 3:10
CLERK OF SUPERIOR COURT
STATE OF WASHINGTON

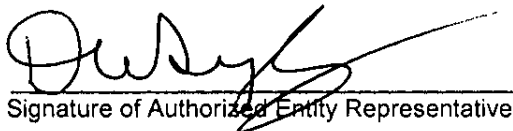
Collectors Insurance Agency, Inc.
Power of Attorney

NOTICE IS HEREBY GIVEN THAT Merchants Credit Corporation, ("Entity") an entity organized under the laws of Washington, does hereby appoint, Angela Butera, Lisa M. Eubanks, Jeff Schoenberg and Janis St. Martin while employed by Collectors Insurance Agency, Inc. as attorney-in-fact for the entity to act for the entity and affiliates and subsidiaries of the entity attached hereto as Exhibit A, specifically organized herein by reference ("the Subsidiaries") in the Entities' and Subsidiaries' names for the limited purposes authorized herein.

The Entity and Subsidiaries, having taken all necessary steps to authorize the changes, hereby grants it's attorney-in-fact the power to execute the documents necessary to file qualifications, certificates of authority, registrations, business registrations, licenses, permits and forms of similar import on behalf of the Entity and Subsidiaries in any state, jurisdiction, the District of Columbia and Puerto Rico.

This Power of Attorney expires when revoked by the Entity or Affiliates or Subsidiaries.

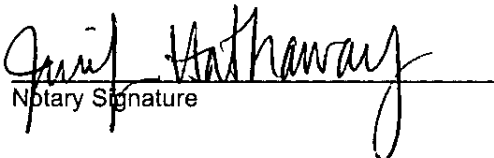
IN WITNESS WHEREOF, the undersigned have executed this Power of Attorney on the 27th day of February, 2013

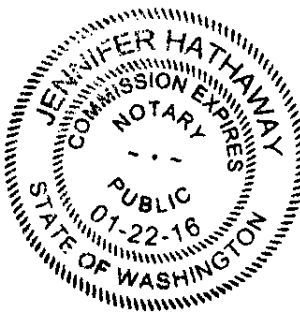

Signature of Authorized Entity Representative

David Quigley, President/Owner
Print Name and Title

Sworn to and subscribed before me
This 27th of February, 2013.

Notary Public, State of Washington
Commission Expires: 01-22-16


Notary Signature



UNITED STATES OF AMERICA

The State of Washington

Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal,
hereby issue this

**CERTIFICATE OF EXISTENCE/AUTHORIZATION
OF
MERCHANTS CREDIT CORPORATION**

I FURTHER CERTIFY that the records on file in this office show that the above named Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 12/28/1954.

I FURTHER CERTIFY that as of the date of this certificate, MERCHANTS CREDIT CORPORATION remains active and has complied with the filing requirements of this office.

Date: January 23, 2014

UBI: 578-072-282



Given under my hand and the Seal of the State
of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State

14 FEB 14 PM 3:10
RECEIVED
STATE
OF WASHINGTON
OLYMPIA