

F14UXX02/86

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

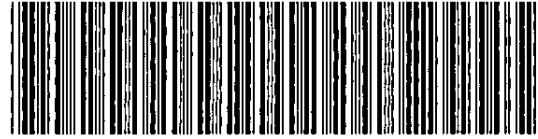
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500260055335

RECEIVED
DIVISION OF CORPORATIONS
14 MAY 19 AM 8:50

RECEIVED
DIVISION OF CORPORATIONS
14 MAY 19 PM 2:04

Handwritten signature and date: 5-20-14



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 125610 7995057

AUTHORIZATION

[Handwritten signature]

COST LIMIT : \$ 70.00

ORDER DATE : May 8, 2014

ORDER TIME : 1:14 PM

ORDER NO. : 125610-004

CUSTOMER NO: 7995057

FOREIGN FILINGS

NAME: TOWERS FINANCIAL, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Gray -- EXT# 62925

EXAMINER: _____

**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. TOWERS FINANCIAL, INC.

(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. DELAWARE

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

3. 36-4785392

(FEI number, if applicable)

4. 5/9/2014

(Date of incorporation)

5. PERPETUAL

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

6. _____

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

7. 2299 Oklahoma Ave SW, Palm Bay, FL, 32908-1253

(Principal office address)

2299 Oklahoma Ave SW, Palm Bay, FL, 32908-1253

(Current mailing address)

8. Consumer commercial debt collections

(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: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

Florida 32301

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.

Corporation Service Company

By: Stephanie Melius Asst. V.P.

(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.

FILED
SECRETARY OF CORPORATION
DIVISION OF CORPORATION
14 MAY 19 AM 8:50

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Herman Zatarra

Address: 2299 Oklahoma Ave SW

Palm Bay, FL, 32908-1253

Director: _____

Address: _____

B. OFFICERS

President: Herman Zatarra

Address: 2299 Oklahoma Ave SW

Palm Bay, FL, 32908-1253

Vice President: _____

Address: _____

Secretary: Herman Zatarra

Treasurer: _____

Address: _____

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. Herman Zatarra, Director

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TOWERS FINANCIAL, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTEENTH DAY OF MAY, A.D. 2014.

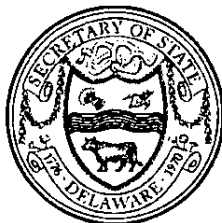
AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TOWERS FINANCIAL, INC." WAS INCORPORATED ON THE NINTH DAY OF MAY, A.D. 2014.

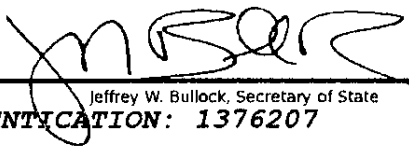
AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

5530914 8300

140640417

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1376207

DATE: 05-15-14