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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

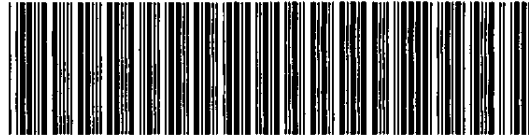
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

JUL 09 2015

J SHIVERS

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Collection Center, Inc.

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:

Randy Fischer

Name of Person

Collection Center, Inc.

Firm/Company

425 N. 5th Street, 2nd Floor

Address

Bismarck, ND 58501

City/State and Zip code

randy.fischer@startek.com

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

For further information concerning this matter, please call:

Randy Fischer

Name of Person

at (303) 901-2428

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:

- | | | | |
|--|--|---|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$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:*

1. Collection Center, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Collection Center of North Dakota, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. North Dakota

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

3. 45-0456546

(FBI number, if applicable)

4. 03/08/2000

(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. 425 N. 5th Street, 2nd Floor, Bismarck, ND 58501

(Principal office address)

425 N. 5th Street, 2nd Floor, Bismarck, ND 58501

(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

CT Corporation System

Office Address:

1200 S. Pine Island Rd.

Plantation

(City)

, Florida

33324

(Zip code)

9. 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.

Hiedi M. Liesch
Assistant Secretary

Hiedi M. Liesch

(Registered agent's signature)

10. 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.

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

A. DIRECTORS

Chairman: Chad Carlson

Address: 8200 E. Maplewood Ave.

Greenwood Village, CO 80111

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Rod Leach

Address: 425 N. 5th Street, 2nd Floor, Bismarck, ND 58501

Vice President: Randy Fischer

Address: 425 N. 5th Street, 2nd Floor, Bismarck, ND 58501

Secretary: Doug Tackett

Address: 425 N. 5th Street, 2nd Floor, Bismarck, ND 58501

Treasurer: _____

Address: _____

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

12. _____
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.

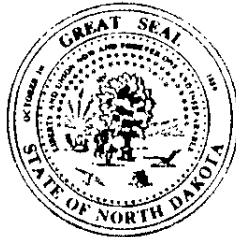
13. Randy Fischer, Vice President

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

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JILL KHASSETT, CLERK

State of North Dakota

SECRETARY OF STATE



CERTIFICATE OF GOOD STANDING OF

COLLECTION CENTER, INC.

The undersigned, as Secretary of State of the State of North Dakota, hereby certifies that COLLECTION CENTER, INC. , a North Dakota BUSINESS CORPORATION, was incorporated in this office on March 8, 2000 and, according to the records of this office as of this date, has paid all fees due this office as required by North Dakota statutes governing a North Dakota BUSINESS CORPORATION.

ACCORDINGLY the undersigned, as such Secretary of State, and by virtue of the authority vested in him by law, hereby issues this Certificate of Good Standing to

COLLECTION CENTER, INC.

Issued: May 7, 2015

Alvin A. Jaeger
Secretary of State

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JALAHASSEE, FLORIDA