

F96000000916

1201 HAYS STREET
TALLAHASSEE, FL 32301
904 222-1171
904 222-1171 FAX

800-342-8086

CSC networks
PRACTICE HALL
LEGAL & FINANCIAL SERVICES

ACCOUNT NO. : 072100000032

REFERENCE : 852445 7104903

AUTHORIZATION :

COST LIMIT : \$ PREPAID

ORDER DATE : February 20, 1996

ORDER TIME : 12:06 PM

ORDER NO. : 852445

CUSTOMER NO: 7104903

CUSTOMER: Ms. Terri Davenport
Credit Systems Inc.
9635 Southern Pine Boulevard

Charlotte, NC 28224

600001719566
02/20/96--01111--002
*****70.00 *****70.00

W96-3850

FOREIGN FILINGS

NAME: CREDIT SYSTEMS, 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: LORI DUNLAP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
RECEIVED
96 FEB 23 AM 7:59
96 FEB 20 PM 1:19
DIVISION OF CORPORATION

h2
2/23
Name conflict
495-24231



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

February 20, 1996

CSC NETWORKS

SUBJECT: CREDIT SYSTEMS, INC.
Ref. Number: W96000003850

*Resubm. +
2/22/96*

We have received your document for CREDIT SYSTEMS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6095.

Jennifer Sindt
Document Examiner

Letter Number: 196A00007395

RECEIVED
96 FEB 22 PM 4:22
DIVISION OF CORPORATIONS



**WRITTEN CONSENT OF A MEMBER OF THE BOARD OF DIRECTORS,
SHAREHOLDER AND AN OFFICER
OF
CREDIT SYSTEMS, INC.**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 FEB 23 AM 7:59

The undersigned, being a member of the Board of Directors, a shareholder and an officer of CREDIT SYSTEMS, INC., a North Carolina corporation (the "Corporation"), does hereby waive any and all requirements for the holding of a meeting or meetings of the shareholders or Board of Directors of the Corporation and does hereby adopt the following resolution by signing his written consent hereto:

WHEREAS, the Corporation desires to transact business in the State of Florida;


WHEREAS, the name CREDIT SYSTEMS, INC. is already in use in the State of Florida; and

WHEREAS, the Corporation desires to transact business in the State of Florida under the name of CREDIT SYSTEMS OF NORTH CAROLINA, INC.;


NOW, THEREFORE, BE IT RESOLVED, that the Corporation hereby adopts the name CREDIT SYSTEMS OF NORTH CAROLINA, INC. as the name under which it will transact business in the State of Florida and such name shall be registered with the corporations division of the Florida Secretary of State.

IN WITNESS WHEREOF, the undersigned hereby indicates his consent in writing, without formal meeting, to the foregoing resolutions dates as of the 21st day of February, 1996.

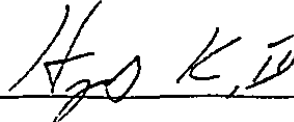
DIRECTOR:


Henry B. Keen, III

SHAREHOLDER:


Henry B. Keen, III

**CREDIT SYSTEMS, INC., a North Carolina
Corporation**

By: 

**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:**

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DIVISION OF CORPORATIONS
FEB 23 7:59

1. Credit Systems, Inc.
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or word or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. North Carolina
(State or country under the law of which it is incorporated)
3. _____
(FEI number, if applicable)
4. 8/19/87
(Date of Incorporation)
5. "perpetual"
(Duration: Year corp. will cease to exist or "perpetual")
6. upon filing
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. P.O. Box 240767
Charlotte, NC 28224
(Current mailing address)
8. Collection Agency
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. **Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)**
Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida, 32301
(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.

Corporation Service Company

Laura R. Dunlap
(Registered agent's signature)

It's agent, Laura R. Dunlap

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 addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: Henry B. Keen, III

Address: 259 Old Mill Rd.

Weddington, NC 28173

Vice President: J.R. McCaskill, Jr.

Address: 712 East Artic

Folly Beach, SC 29439

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. _____
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Henry B. Keen, President J.R. McCaskill, Vice-President
(Typed or printed name and capacity of person signing application)

STATE OF NORTH CAROLINA



Department of the
Secretary of State

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
FEB 23 AM 7:59

CERTIFICATE OF EXISTENCE

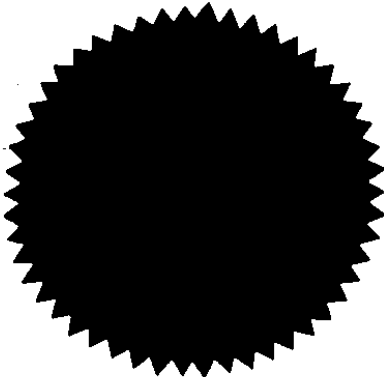
I, RUFUS L. EDMISTEN, Secretary of State of the State of North Carolina, do hereby certify that

CREDIT SYSTEMS, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 19th day of August, 1987, with its period of duration being perpetual.

I FURTHER certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by G.S. 55-16-22 **has been** delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 13th day of February, 1996.



Rufus L. Edmisten

Secretary of State