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TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section
Division of Corporations

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-04/23/98--01067--004
*****70.00 *****70.00

SUBJECT: CAROLINA COLLECTION SERVICE, 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", 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:

ROBERT T. SALASSI, JR.

(Name of Person)

CAROLINA COLLECTION SERVICE, INC.

(Firm/Company)

3850 N. CAUSEWAY BLVD., SUITE 560

(Address)

METAIRIE, LA 70002-1752

(City/State/Zip)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 APR 22 PM 1:50
mtm

Should you need to call someone concerning this matter, please call:

ROBERT T. SALASSI, JR.

(Name of Person)

at (504) 838-2200

(Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Sec.
Division of Corporations
409 E. Gaines St
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**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. CAROLINA COLLECTION SERVICE, INCORPORATED
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words 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. SOUTH CAROLINA
(State or country under the law of which it is incorporated)
3. 72-1218029
(FEI number, if applicable)
4. JULY 23, 1992
(Date of Incorporation)
5. PERPETUAL
(Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. 3850 N. CAUSEWAY BLVD., SUITE 560, METAIRIE, LA 70002-1752
P.O. BOX 6991, METAIRIE, LA 70009-6991
(Current mailing address)
8. ACCOUNTS RECEIVABLE COLLECTIONS
(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: F. PERRY ODOM
Office Address: 305 SOUTH GADSDEN 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.


(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.

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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: STEPHEN C. HARTEL, JR.

Address: 4101 VENDONE PLACE
NEW ORLEANS, LA 70125

Vice President: ROBERT T. SALASSI, JR.

Address: 2422 BROADWAY
NEW ORLEANS, LA 70125


Secretary: LESTER H. NULL, JR.

Address: 4505 TRACEY STREET
MERAUX, LA 70075

Treasurer: LESTER H. NULL, JR.

Address: 4505 TRACEY STREET
MERAUX, LA 70075

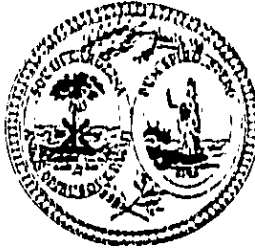
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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

14. ROBERT T. SALASSI, JR. - VICE-PRESIDENT
(Typed or printed name and capacity of person signing application)

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The State of South Carolina



Office of Secretary of State Jim Miles

Certificate of Existence

96 APR 22 PM 1:50
SECRETARY OF STATE
DIVISION OF CORPORATIONS

I, Jim Miles, Secretary of State of South Carolina Hereby certify that:

CAROLINA COLLECTION SERVICE, INC.,

a corporation duly organized under the laws of the State of South Carolina on **August 13th, 1992**, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to Section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of the State at Columbia this 20th day of March, 1996.

A handwritten signature in cursive script that reads "Jim Miles".

Jim Miles, Secretary of State

Note: This certificate does not contain any representation concerning fees or taxes owed by the Corporation to the South Carolina Tax Commission or whether the Corporation has filed the annual report with the Tax Commission. It is important to know whether the Corporation has paid all taxes due to the State of South Carolina, and has filed the annual reports, a certificate of compliance must be obtained from the Tax Commission.