

F96000006373

TO: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: MILLIKEN & MICHAELS RECEIVABLES MANAGEMENT, 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:

JACKIE CANAVIER

(Name of Person)

LAW OFFICE OF DAVID ISRAEL

(Firm/Company)

3850 NORTH CAUSEWAY BOULEVARD, SUITE 350

(Address)

METAIRIE, LA 70002

(City/State/Zip)

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*****630.00 *****78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

95 DEC - 6 PM 3:40

FILED

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

JACKIE CANAVIER

(Name of Person)

at (504) 828-3700
(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



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

November 27, 1996

JACKIE CANAVIER
DAVID ISRAEL
3850 N. CAUSEWAY BLVD., #350
METAIRIE, LA 70002

SUBJECT: MILLIKEN & MICHAELS RECEIVABLES MANAGEMENT, INC.
Ref. Number: W96000025065

We have received your document for **MILLIKEN & MICHAELS RECEIVABLES MANAGEMENT, 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 date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date.

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) 487-6093.

Freta Lott
Corporate Specialist Supervisor

Letter Number: 096A00053780

**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. **MILLIKEN & MICHAELS RECEIVABLES MANAGEMENT, INC.**
(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. **LOUISIANA**
(State or country under the law of which it is incorporated)
3. **72-1242285**
(FEI number, if applicable)
4. **6/9/93**
(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 NORTH CAUSEWAY BOULEVARD, 2ND FLOOR**
METairie, LA 70002
(Current mailing address)
8. **COMMERCIAL 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: **C T CORPORATION SYSTEM**
Office Address: **1200 SOUTH PINE ISLAND ROAD**
PLANTATION, Florida, **33324**
(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)

E. Wayne Patterson, Asst. Vice President

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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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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: MICHAEL G. SANDERSON
Address: 3850 NORTH CAUSEWAY BOULEVARD, 2ND FLOOR
METAIRIE, LA 70002
Vice Chairman: _____
Address: _____
Director: _____
Address: _____
Director: _____
Address: _____

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

President: MICHAEL G. SANDERSON
Address: 3850 NORTH CAUSEWAY BOULEVARD, 2ND FLOOR
METAIRIE, LA 70002
Vice President: THOMAS V. CEFALU, III
Address: 3850 NORTH CAUSEWAY BLVD., 2ND FLOOR
METAIRIE, LA 70002
Secretary: JACQUELINE S. CANAVIER
Address: 3850 NORTH CAUSEWAY BOULEVARD, SUITE 350
METAIRIE, LA 70002
Treasurer: THOMAS V. CEFALU, III
Address: 3850 NORTH CAUSEWAY BLVD., 2ND FLOOR
METAIRIE, LA 70002

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

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

14. JACQUELINE S. CANAVIER - SECRETARY
(Typed or printed name and capacity of person signing application)

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

UNITED STATES OF AMERICA
State of Louisiana

Box McKeithen
SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that
MILLIKEN & MICHAELS RECEIVABLES MANAGEMENT, INC.

A LOUISIANA corporation domiciled at METAIRIE,

Filed charter and qualified to do business in this State on
June 09, 1993,

I further certify that the records of this Office indicate
the corporation has paid all fees due the Secretary of
State, and so far as the Office of the Secretary of State is
concerned is in good standing and is authorized to do
business in this State.

I further certify that this Certificate is not intended to
reflect the financial condition of this corporation since
this information is not available from the records of
Office.

*In testimony whereof, I have hereunto set
my hand and caused the Seal of my Office
to be affixed at the City of Baton Rouge on,*

October 14, 1996

Box McKeithen

CBU

Secretary of State



FILED
96 DEC -6 PM 3:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA