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STUDENT LOAN RECOVERY CENTER, INC.

500 Water Street, S/C J-160

Jacksonville, FL 32202

Patricia J. Aftora
Vice-President and Corporate Secretary

(904) 366-4242
FAX (904) 366-4248

January 12, 1998

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

700002404447--4
-01/20/98--01038--009
*****70.00 *****70.00

Subject: Student Loan Recovery Center, Inc.

Gentlemen:

The enclosed Application by Foreign Corporation for Authorization to Transact Business in Florida, Certificate of Existence, and check in the amount of \$70 are submitted to register Student Loan Recovery Center, Inc. as a foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Patricia J. Aftora
Vice-President and Corporate Secretary
Student Loan Recovery Center, Inc.
500 Water Street, S/C J-160
Jacksonville, FL 32202

Should you need to call someone concerning this matter, please call Joyce Dolan, Assistant Secretary at (904) 366-4243.

Very truly yours,



PJA/jad/rlb

Enclosures

11/23

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DIVISION OF CORPORATIONS
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**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. Student Loan Recovery Center, 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. Delaware
(State or country under the law of which it is incorporated)
3. 59-3483003
(FEI number, if applicable)
4. December 4, 1997
(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. 500 Water Street, S/C J-160
Jacksonville, FL 32202
(Current mailing address)
8. Managing student loan collection process
(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: Patricia J. Aftoora

Office Address: 500 Water Street
Jacksonville, Florida, 32202
(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:~~ S. A. Larson

Address: 901 East Cary Street
Richmond, VA 23219

~~Vice Chairman:~~ B. A. Schwinger

Address: 301 West Bay Street
Jacksonville, FL 32202

Director: D. A. Boor

Address: 901 East Cary Street
Richmond, VA 23219

Director:

Address:

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

President: B. A. Schwinger

Address: 301 West Bay Street
Jacksonville, FL 32202

Vice President: S. A. Larson

Address: 901 East Cary Street
Richmond, VA 23219

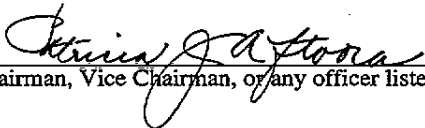
Vice-President &
Secretary: P. J. Aftoora

Address: 500 Water Street
Jacksonville, FL 32202

Treasurer: J. Tilbrook

Address: 301 West Bay Street
Jacksonville, FL 32202

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. Patricia J. Aftoora, Vice-President
(Typed or printed name and capacity of person signing application)

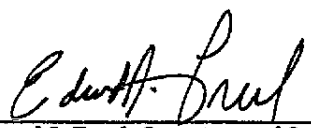
State of Delaware
Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "STUDENT LOAN RECOVERY CENTER, 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 NINTH DAY OF JANUARY, A.D. 1998.

FILED
SECRETARY OF STATE
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Edward J. Freel, Secretary of State

AUTHENTICATION:

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DATE: 8858365

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