April 13, 1998	
Qualification/Tax Lien Section  Division of Corporations  PO Box 6327  Tallahassee, FL 32314	002492499—6 -04/17/9801082001 ******70.00 *****70.00 W98-8657
RE: Foreign Non-Profit Corporation - Application for Certificate of Authority	
Dear Secretary of State:	
Enclosed please find two complete applications for Certificate of Authority of a Foreign Non-Profit Corporation along with the Certificate of Existence and a check made payable to Florida Department of State in the amount of \$70.00.  Should you have any questions or need additional information, please feel free to contact me. Thank you.	
Sincerely,	P. 86
Christine Grego Christine Grego Compliance Coordinator Enclosure	UL 14 AM 9: 18
	mtn
	7/14



### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 17, 1998

KATHLEEN M. BEAUDETTE - COMPLIANCE MANAGER PAS FINANCIAL GROUP, INC. 6301 CAMPUS CIRCLE DRIVE EAST STE 100 IRVING, TX 75063

SUBJECT: AMERICAN ASSOCIATION FOR FINANCIAL INSTITUTION

SERVICES Ref. Number: W98000008657

We have received your document for AMERICAN ASSOCIATION FOR FINANCIAL INSTITUTION SERVICES 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 corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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 (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 498A00020797

# TRANSMITTAL LETTER

**TO:** Qualification/Registration Section Division of Corporations

SUBJECT: American Association for Financial Institution Services (Name of Corporation)

### Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conducts its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Rathleen M. Beaudette Compliance Manager	-
(Name of Person)	
PAS Financial Group, Inc.	
(Firm/Company)	
6301 Campus Circle Drive, East Suite 100 Irving, TX	7506
(Address)	<del></del>
	TI AND THE PARTY OF THE PARTY O
	<b>-</b>
(City, State and Zip Code)	
	့ တွ
For further information concerning this matter, please call:	- 18 S
Kathleen Beaudette at ( 972 ) 756-0212 exten	sion 228
(Name of Person) Area Code & Daytime Telephone Num	

### **COURIER ADDRESS:**

#### **MAILING ADDRESS:**

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

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

# APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

Name of corporation: must include the word "INCORPORATED" or "CORPORATION abbreviations of like import in language as will clearly indicate that it is a corporation include the corporation in the corpora	Services <b>C</b> orporation
abbreviations of like import in language as will clearly indicate that it is a corporation inst person or partnership if not so contained in the name at present. "Company" or "Co." may corporate suffix by a nonprofit corporation.)	"or words or ead of a natural not be used as a
. <u>Texas</u> 3. 75-2337	610
(State or country under the law of which (FFI number if as	
it is incorporated)	
10-18-1971 Perpetual	
(Date of Incorporation)  (Duration: Year corp. will a "perpetual")	cease to exist or
- Presently	
(Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.155, F.S.)	
6301 Campus Circle Drive, East Suite 100	· .
Tuesday at TIV 55000	
Irving, TX 75063 (Current mailing address)	
	<del></del>
To solicit members into non -profit organizatio for discounted services, merchandise, etc.	n that would arrang
Purpose(s) of corporation authorized in home state or country to be carried out in the state	of Florida)
Name and street address of Florida registered agent:	
	<del>u</del>
C T CORPORATION SYSTEM	
C T CORPORATION SYSTEM (Name)	98 JU
C T CORPORATION SYSTEM (Name)	
C T CORPORATION SYSTEM (Name)	
C T CORPORATION SYSTEM  (Name)  c/o CT Corporation System 1200 South Pine  (Office address)	
C T CORPORATION SYSTEM  (Name)  c/o CT Corporation System 1200 South Pine  (Office address)  Plantation Florida 33324	
C T CORPORATION SYSTEM  (Name)  c/o CT Corporation System 1200 South Pine  (Office address)	
C T CORPORATION SYSTEM  (Name)  c/o CT Corporation System 1200 South Pine  (Office address)  Plantation , Florida 33324  (City) (Zip Code)	JUL HAM 9: 18
C T CORPORATION SYSTEM  (Name)  C/o CT Corporation System 1200 South Pine  (Othce address)  Plantation , Florida, 33324  (City) (Zip Code)  Registered agent's acceptance:	JUL HU AM 9: 18
C T CORPORATION SYSTEM  (Name)  C/O CT Corporation System 1200 South Pine (Office address)  Plantation , Florida 33324  (City) , Florida (Zip Code)  Registered agent's acceptance:	JUL HU AM 9: 18
C T CORPORATION SYSTEM  (Name)  C/o CT Corporation System 1200 South Pine  (Othice address)  Plantation , Florida, 33324  (City) (Zip Code)  Registered agent's acceptance:  ring been named as registered agent and to accept service of process for process for acceptance that place designed the place designed to the place designed	Island Rd-II AM 9: 18  the above stated
C T CORPORATION SYSTEM  (Name)  C/O CT Corporation System 1200 South Pine  (Office address)  Plantation , Florida 33324  (City) , (Zip Code)  Registered agent's acceptance:  Ping been named as registered agent and to accept service of process for procession at the place designated in this application, I hereby accept the acceptance agent and agree to act in this capacity. I further agree to comply the statutes relative to the proper and complete regions.	Island Roy OF STATE  The above stated
C T CORPORATION SYSTEM  (Name)  c/o CT Corporation System 1200 South Pine (Office address)  Plantation , Florida, 33324  (City) (Zip Code)  Registered agent's acceptance: ring been named as registered agent and to accept service of process for coration at the place designated in this application, I hereby accept the astered agent and agree to act in this capacity. I further agree to comply and accept the obligations of my position as registered agent.  RANDY	Island Rd FILED  9:
C T CORPORATION SYSTEM  (Name)  c/o CT Corporation System 1200 South Pine  (Office address)  Plantation , Florida 33324  (City) (Zip Code)  Registered agent's acceptance: ing been named as registered agent and to accept service of process for coration at the place designated in this application, I hereby accept the astered agent and agree to act in this capacity. I further agree to comply and accept the obligations of my position as registered agent.  RANDY	Island Rd FILED  9: 18 19 19 19 19 19 19 19 19 19 19 19 19 19

- 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)

Chairma	n: Jerry D. Beck			
	6301 Campus Circle Drive, East Suite 1			
	Irving, TX 75063		-	
Vice Cha	irman:			
Director:	Jerry D. Beck			
Address:	6301 Campus Circle Drive, East Suite 10	0		
	Irving, TX 75063			
Director:				
			S	S Program
B.OFFIC	CERS (Street address only- P. O. Box NOT acceptable)		JUL	
	Jerry D. Beck		- -	
	6301 Campus Circle Drive, East Suite 100	-	. E	* 3
	Irving, TX 75063		Ų	## Q: 18
Vice Presi	ident:		č	œ <u>글</u>
Secretary:				
Address:	_			
·		.40		
NOTE: If	necessary, you may attach an addendum to the application listing	ng additi	onal off	icers
and/or dire	ectors.			
13. X	ue of Chairman, Vice Phairman of any officer listed in number 12 of the analysis	_		
(nignan	ne of Chairman, Vice Chairman, or any officer listed in number 12 of the appl	ication)	<u></u>	
<del></del>	(Typed or printed name and capacity of person signing application)			



# The State of Texas

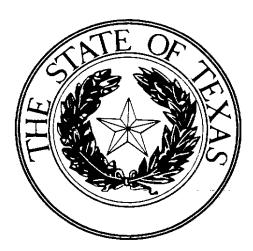
# SECRETARY OF STATE

### IT IS HEREBY CERTIFIED that Articles of Incorporation of

# AMERICAN ASSOCIATION FOR FINANCIAL INSTITUTION SERVICES File No. 297153-01

were filed in this office and a certificate of incorporation was issued to this corporation, and no certificate of dissolution is in effect and the corporation is currently in existence.

SECRETARY OF STATE DIVISION 14 AM 9: 18



IN TESTIMONY WHEREOF, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in the City of Austin, on February 18, 1998.

Albanta B. Complex

Alberto R. Gonzales Secretary of State PH