

F980000006193

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT:

Allied National, 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:

Michael T. David

(Name of Person)

Allied National, Inc.

(Firm/Company)

440 Regency Pkwy Suite 134

(Address)

Omaha, NE 68114

(City/State/Zip)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 NOV 10 AM 9:27

mt
11/10

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

Michael T. David

(Name of Person)

at

(402) 393-3477

(Area Code & Daytime Telephone Number)

800002683539-8
-11/09/98-01122-003-
*****70.00 *****70.00

STREET ADDRESS:

Qualification/Tax Lien Section
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. Allied National 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. Nebraska 3. 47-0752895
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. November 15, 1991 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. Allied National, Inc.
440 Regency Pkwy #134 Omaha, NE 68114
(Current mailing address)

8. Collection Agency
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

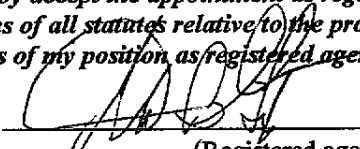
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: Mr. Alan Gest

Office Address: 20801 Biscayne Blvd. Suite 506
Miami, FL, Florida, 33180
(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.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 NOV 10 AM 9:27

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: Michael T. David

Address: 11227 William Plaza

Omaha, NE 68144

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. Michael T. David

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

14. Michael T. David President

(Typed or printed name and capacity of person signing application)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 NOV 10 AM 9:27

STATE OF

NEBRASKA

United States of America,
State of Nebraska

ss.



Department of State
Lincoln, Nebraska

I, Scott Moore, Secretary of State of the State of Nebraska do hereby
certify;

ALLIED NATIONAL INC.

was duly incorporated under the laws of this state on November 15, 1991,
and do further certify that no occupation taxes assessed are unpaid
and no annual reports are delinquent; articles of dissolution have
not been filed; and said corporation is in existence as of the date
of this certificate.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 NOV 10 AM 9:27

In Testimony Whereof,

I have hereunto set my hand and
affixed the Great Seal of the State
of Nebraska on September 1
in the year of our Lord, one thousand
nine hundred and ninety-eight.



Scott Moore

SECRETARY OF STATE