

Document Number Only

C T Corporation System

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301

City

State

Zip

Phone

CORPORATION(S) NAME

500002823885--0

-03/30/99--01074--015

\*\*\*\*\*70.00 \*\*\*\*\*70.00

500002823885--0

-03/30/99--01074--016

\*\*\*\*\*8.75 \*\*\*\*\*8.75

AMRESO Consumer Receivable Corporation

☒ Profit

☐ NonProfit

☐ Limited Liability Company

☒ Foreign

☐ Amendment

☐ Dissolution/Withdrawal

☐ Annual Report

☐ Reservation

☐ Photo Copies

☐ Call if Problem

☐ Will Wait

☐ Merger

☐ Mark

☐ Other

☐ Change of R.A.

☐ Fictitious Name

☐ Limited Partnership

☐ Reinstatement

☐ Limited Liability Partnership

☐ Certified Copy

☐ Call When Ready

☒ Walk In

☐ Mail Out

☐ After 4:30

☒ Pick Up

Name

Availability

Document

Examiner

Updater

Verifier

Acknowledgment

W.P. Verifier

3/30/99

PLEASE RETURN EXTRA COPY(S)

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THANKS

JOEY

# 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. AMRESCO Consumer Receivables Corporation

(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. Applied For

(FEI number, if applicable)

4. March 25, 1999

(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 817.156, F.S.))

7. 700 N. Pearl Street, Suite 2400, Dallas, Texas 75201-7424

(Current mailing address)

Any and all lawful business for which corporations may be incorporated under  
8. the laws of Florida and Delaware  
(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:

Name: C T Corporation System

Office Address: c/o C T Corporation System, 1200 South Pine Island Road

Plantation, Florida, 33324

(Zip Code)

10. Registered agent 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 obligation of my position as registered agent.

C T Corporation System

Marianne Jones

(Registered agent's signature) (Officer)

Marianne Jones

Special Assistant Secretary

(Type Name and Title of Officer)

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TALLAHASSEE, FLORIDA

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:

A. DIRECTORS

Chairman: See attached list of directors

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: See attached list of directors

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: See attached list of directors

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

B. OFFICERS

President: See attached list of officers

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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. L. Keith Blackwell, <sup>Senior</sup> Vice President

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

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TALLAHASSEE FLORIDA

# **Directors and Officers of AMRESKO Consumer Receivables Corporation**

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## Directors:

1. L. Keith Blackwell  
700 N. Pearl Street, Suite 2400  
Dallas, TX 5201-7424

## Officers:

1. Douglas R. Urquhart, President  
700 N. Pearl Street, Suite 2400  
Dallas, TX 5201-7424
2. Gregory M. Adams, Executive Vice President  
700 N. Pearl Street, Suite 2400  
Dallas, TX 5201-7424
3. L. Keith Blackwell, Senior Vice President, General Counsel & Secretary  
700 N. Pearl Street, Suite 2400  
Dallas, TX 5201-7424
4. Mark J. Miller, Senior Vice President  
700 N. Pearl Street, Suite 2400  
Dallas, TX 5201-7424
5. Andrew S. Doughtie, Vice President  
700 N. Pearl Street, Suite 2400  
Dallas, TX 5201-7424
6. Darrel E. Hurt, Jr., Vice President  
700 N. Pearl Street, Suite 2400  
Dallas, TX 5201-7424
7. Don Boubel, Vice President  
700 N. Pearl Street, Suite 2400  
Dallas, TX 5201-7424

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TALLAHASSEE FLORIDA

State of Delaware  
Office of the Secretary of State

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PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AMRESKO CONSUMER RECEIVABLES CORPORATION" 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 TWENTY-NINTH DAY OF MARCH, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



A handwritten signature in cursive script, reading "Edward J. Freel", is written over a horizontal line.

Edward J. Freel, Secretary of State

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991122424

AUTHENTICATION: 9657489

DATE: 03-29-99

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TALLAHASSEE FLORIDA