# F9900000003884

	To:	Qualification/Ta Division of Cor		Please	Rush	6					
	SUBJE	ECT: <u>Summ</u>	s Recover	of corporation	Nection - must in		<u></u>	<del></del>	<del></del>		
-	Dear S	ir 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:										
	Harry E. Colon EsQ. 40002941224— -07/26/990110700 (Name of Person) ******78.75 *****78										
	Chaplin, Papa + Gonet (Firm/Company)										
	406 Wort Broad St.										
	(Address)										
	Richmond Va. 23220-4263										
	/ (City/State/Zip)										
	Should you need to call someone concerning this matter, please call:							SO JUL 25			
	Henry E. (own at (804) 643-0133 = 3										
	·	9: 43									
	STRE	ET ADDRESS:	-		MAILIN	G ADDRESS	S:	4m	tn		
	Division 409 E.	ication/Tax Lien on of Corporation Gaines St.	ıs		Division P.O. Box	tion/Tax Lien of Corporation 6327 see, FL 32314	ns	7/	m 129		
		assee, FL 32399			I dilanasa	, r D 32317					
	Enclos	sed is a check for	the following am	ount:							
	<b>5</b> \$70	0.00 Filing Fee	\$78.75 Filin Certificate		\$78.75 Fi	iling Fee & Copy	S87.50 F Certification	ate of Stat	us &		

### 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. Summs Recovery + Collections, 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.)
natural person of partitership it not so contained in the name at presently
0 111 of 11 outside - 111 07102217
2: Commonwer the law of which it is incorporated)  3. 54-0703357  (FEI number, if applicable)
(State or country under the law of which it is incorporated) (FEI number, it applicable)
4. (Date of incorporation)  5. (Duration: Year corp. will cease to exist or "perpetual")
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6 Unas ouslification
6. Upon qualification (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. Yo Harry E. Cohn 406 West Broad St
Bich mond, Vz. 23220-4263
(Current mailing address)
8. Auto Recovery Trypound and private nuestinations (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
(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)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: RALPH G. PATINO, ESQ.
· ·
Office Address: 225 Alcazar Aul
Compol Cololor Blowide 2213H
Coral Gables, Florida, 33134 (Zip code)
(Exp 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,
KIN MAN
(Registered agent's signature)
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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)								
Chairman:								
Address:								
Vice Chairman:								
Address:								
Director:								
Address:								
Director:								
Address:								
B. OFFICERS (Street address only - P.O. Box NOT acceptable)								
President: Brock A Summs								
Address: UTA WEST SOUTH STALL TREE								
Richmond, Va. 23224	_							
Vice President: Michael F. MacQuarrie								
Address: 7700 Poplar Hill Lane 5								
Clinton, Md. 20735								
Secretary: Michael F. Mac Quarrie								
Address:Same								
Treasurer: Michael F. Mac. Quarrie								
Address: Szwl								
Addition .								
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. Brock A. Summs President  (Typed or printed name and capacity of person signing application)	:-							

## Commonwealthodinginia



### State Corporation Commission

#### I Certify the Following from the Records of the Commission:

SUMMS RECOVERY & COLLECTIONS, INCORPORATED is a corporation existing under and by virtue of the laws of Virginia, and is in good standing.

The date of incorporation is January 04, 1962.

Nothing more is hereby certified.

99 JUL 26 AM 9: 43



Signed and Sealed at Richmond on this Date: June 23, 1999

Joel H. Peck, Clerk of the Commission