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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**FLORIDA/FOREIGN LIMITED LIABILITY CO.****NATIONAL CREDIT REPAIR PLUS, LLC.**

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NATIONAL CREDIT REPAIR PLUS, LLC.

(NAME OF ORGANIZATION IN FULL)

THE UNDERSIGNED SUBSCRIBERS TO THESE ARTICLES OF ORGANIZATION, EACH A NATURAL PERSON COMPETENT, HEREBY ASSOCIATE THEMSELVES TOGETHER TO FORM A LIMITED LIABILITY COMPANY UNDER THE LAWS OF THE STATE OF FLORIDA.

ARTICLE I

THE NAME OF THE ORGANIZATION IS:

NATIONAL CREDIT REPAIR PLUS, LLC.

ARTICLE II

THE GENERAL NATURE OF THE BUSINESS TO BE TRANSACTED BY THIS ORGANIZATION IS AS FOLLOWS: TO CONDUCT BUSINESS IN, HAVE ONE OR MORE OFFICES IN, AND BUY, HOLD, SELL, CONVEY, LEASE OR OTHERWISE DISPOSE OF PERSONAL AND REAL PROPERTY, INCLUDING FRANCHISES, TRADEMARKS, PATENTS, COPYRIGHTS, LICENSES, IN THE STATE OF FLORIDA AND OTHER STATES AND COUNTRIES.

PREPARED BY: OTHIEL TURNER & COMPANY, ACCOUNTANTS.
5787 WEST SUNRISE BLVD.
PLANTATION, FL 33313
(954) 583-2205

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ARTICLE III

THE INITIAL POST OFFICE ADDRESS OF THIS ORGANIZATION IS
5787 W SUNRISE BLVD
PLANTATION, FL 33313
BROWARD COUNTY OF FLORIDA. THE MEMBERS, FROM TIME TO TIME, MAY
MOVE THE PRINCIPLE OFFICE TO ANY OTHER ADDRESS IN FLORIDA.

ARTICLE IV

CERTIFICATE DESIGNATING PLACE OF DOMICILE OR BUSINESS OF SERVICE OF
PROCESS IN THE STATE OF FLORIDA AND DESIGNATION OF RESIDENT AGENT
FOR SERVICE OF PROCESS.

IN PURSUANCE OF F.S. 48.091, THE^d FOLLOWING IS SUBMITTED IN
COMPLIANCE WITH SAID ACT:

THAT DESIRING TO ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA
WITH THE FOLLOWING PERSON DESIGNATED AS AGENT TO ACCEPT SERVICE OF
PROCESS. OTHEL TURNER ADDRESS: 5787 W SUNRISE BLVD, PLANTATION, FL
33313.

ACKNOWLEDGMENT

HAVING BEEN NAMED BY THE ABOVE CORPORATION TO ACCEPT SERVICE OF
PROCESS DESIGNATED IN THE ABOVE CERTIFICATE, I HEREBY AGREE TO ACT
IN SAID CAPACITY AND TO COMPLY WITH THE PROVISIONS OF KEEPING SAID
OFFICE OPEN.

BY: 

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ARTICLE V

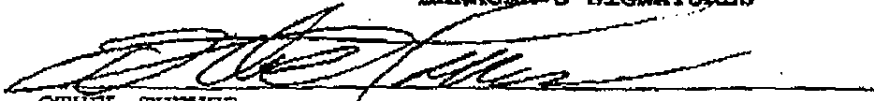
THE NAMES AND POST OFFICE ADDRESSES OF THE MANAGER OF ORGANIZATION:

OTHEL TURNER

5787 W SUNRISE BLVD

PLANTATION, FL 33313


MANAGER'S SIGNATURES


OTHEL TURNER

STATE OF FLORIDA)
COUNTY OF BROWARD) SS

BEFORE ME, THE UNDERSIGNED AUTHORITY, DULY AUTHORIZED TO TAKE OATHS
AND RECEIVE ACKNOWLEDGMENTS, PERSONALLY APPEARED OTHEL TURNER
APPEARED BEFORE ME THE PERSON(S) DESCRIBED AS SUBSCRIBER(S) IN THE
WHO EXECUTED THE FOREGOING ARTICLES OF INCORPORATION.

WITNESS MY HAND AND SEAL THIS 23 DAY OF January, 2008.


(SIGNATURE OF NOTARY)

NOTARY PUBLIC, STATE OF FLORIDA



NICOLE C. SEELAL
MY COMMISSION # DD 688718
EXPIRES: June 25, 2011
Bonded Through Budget Notary Services

(SEAL)

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