

M030000000181

00789-00611-00671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

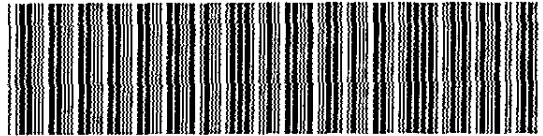
Certified Copies 1

Certificates of Status 1

Special Instructions to Filing Officer:

1/6 FOR UG
CC & WS
W03-455

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01/06/03--01024--001 **160.00

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03 JAN -6 PM 2:53

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A.R.C. ACCOUNTS RECOVERY (U.S.A.) CORPORATION LLC
(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:

NEIL DICKINSON

(Name of Person)

A.R.C. ACCOUNTS RECOVERY CORPORATION

(Firm/Company)

207-1497 ADMIRALS RD.

(Address)

VICTORIA, B.C., CANADA, V9K 2P8

(City/State and Zip code)

For further information concerning this matter, please call:

NEIL DICKINSON

(Name of Person)

at (250) 953-6900

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

January 7, 2003

NEIL DICKINSON
A.R.C. ACCOUNTS RECOVERY (U.S.A.) CORPOR
207-1497 ADMIRALS RD.
VICTORIA, B.C., CANADA, V9L-2P8

SUBJECT: A.R.C. ACCOUNTS RECOVERY (U.S.A.) CORPORATION LLC
Ref. Number: W03000000455

We have received your document for A.R.C. ACCOUNTS RECOVERY (U.S.A.) CORPORATION LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 803A00000750

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662, TALLAHASSEE, FL 32302
1333 N. DUVAL STREET, TALLAHASSEE, FL 32303
PH: (850) 668-4318 FX: (850) 668-3398

FACSIMILE TRANSMITTAL SHEET	
ATTN:	
COMPANY:	
FAX NUMBER:	TOTAL PAGES TO FOLLOW:
RE:	

NOTES/COMMENTS:

*Please mail back to
addressee on attached ltr*

Thanks,

Paul Hodge

STATE OF FLORIDA
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

03 JAN 15 PM 4:23

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Please notify us immediately if an error occurs in this transmission.

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACT BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. A.R.C. ACCOUNTS RECOVERY (U.S.A.) CORPORATION LLC
(Name of foreign limited liability company)

2. DELAWARE
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 98-0377553
(FEI number, if applicable)

4. 4/9/02
(Date of Organization)

5. PERPETUAL
(Duration: Year limited liability company will cease to exist or "perpetual")

6. NONE AS YET
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))

7. 207-1497 ADMIRALS RD. VICTORIA, B.C. CANADA, V9L 2P8

(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☒

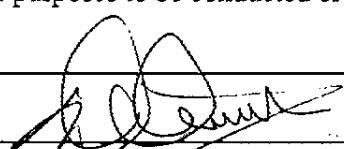
9. The name and usual business addresses of the managing members or managers are as follows:

JOSEPH POLARD
207-1497 ADMIRALS RD.
VICTORIA B.C. CANADA
V9L 2P8

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: COLLECTIONS AND

SKIP TRACING


Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

NEIL DICKINSON

Typed or printed name of signee

FILED
03 JAN - 6 PM 2:53
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

A.R.C. ACCOUNTS RECOVERY (USA) CORPORATION LLC

2. The name and the Florida street address of the registered agent and office are:

FLORIDA FILING - SEARCH SERVICES
(Name)

1333 NORTH DUAL ST

Florida street address (P.O. Box **NOT** ACCEPTABLE)

TALLAHASSEE FL 32302
(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

P.D. Hodge President
(Signature)

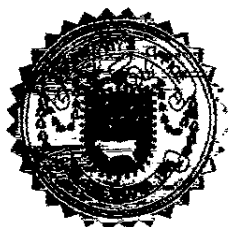
\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "A.R.C. ACCOUNTS RECOVERY (U.S.A) CORPORATION LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTEENTH DAY OF DECEMBER, A.D. 2002.



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

3501361 8300

AUTHENTICATION: 2153643

020731012

DATE: 12-17-02