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TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

200003125812--0

-02/07/00--01103--007

*****87.50 *****87.50

SUBJECT: Promise Consumer Credit Services, Inc.
(Proposed corporate name - must include suffix)

Ms. Batten 2/21/00

Thank you for
your help in
filing this document
properly. You can
reach me at my
office # (561) 734-6397
if you have any questions
The Marcella

the articles of incorporation and a check for :

☐ \$78.75

Filing Fee

& Certified Copy

☒ \$87.50

Filing Fee,

Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: MARCELLA M. WORRELL
Name (Printed or typed)

P.O. Box 970668
Address

COCONUT CREEK, FL 33097
City, State & Zip

(954) 574-0442
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

FILED

00 FEB 24 AM 8:16
SECRET
TALLAHASSEE FLORIDA

CPB
2-24-00
3



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 15, 2000

MARCELLA M. WORRELL
P.O. BOX 970668
COCONUT CREEK, FL 33097

SUBJECT: PROMISE CONSUMER CREDIT SERVICES, INC.
Ref. Number: W00000003982

We have received your document for PROMISE CONSUMER CREDIT SERVICES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the corporation is being organized.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please list a Registered Agent with a street address in Article V.

The registered agent must sign accepting the designation.

Please return the original and one copy of 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) 487-6930.

Carolyn Batten
Document Specialist

Letter Number: 000A00007761

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be:

PROMISE Consumer Credit Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3740 NW 71 St.
Coconut Creek, FL 33073

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is(are):

To help consumers Consolidate their debt to creditor to one monthly payment. They make the payment to us and we pay the creditors, they also receive lower interest rates.

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:

As stated in the by-laws

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Marcella M. Warrell
3740 NW 71 Street
Coconut Creek, FL 33073

ARTICLE VI INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are: Joseph Warrell-D.

Marcella M. Warrell-Dennis Warrell
3740 NW 71 Street, Coconut Creek, FL 33073

Marcella M. Warrell
Signature/Incorporator

2/21/00
Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Marcella M. Warrell
Signature/Registered Agent

2/21/00
Date

FILED
00 FEB 24 AM 8:16
SECRETARY OF STATE
TALLAHASSEE FLORIDA