

N9500002268

TRANSMITTAL LETTER

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

SUBJECT: Credit Counseling Centers of America, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM:

Sherri Sparrow

Name (Printed or typed)

P.O. Box 3201

Address

Pompano Beach, Florida 33072

City, State & Zip

(305) 480-2894

Daytime Telephone number

300001480149
-05/09/95--01027--002
****131.25 ****131.25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

95 MAY -8 PM 5:24

FILED

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

T. BROWN MAY 10 1995

ARTICLES OF INCORPORATION
(Non-Profit Corporation)

FILED
95 MAY -8 PM 5:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, acting as incorporator(s) of a corporation pursuant to Chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

ARTICLE I
Name

The name of the corporation shall be: Credit Counseling Centers of America, Inc.

ARTICLE II
Principal place of business and mailing address

The principal place of business and the mailing address of this corporation shall be:
P.O. Box 3201, Pompano Beach, Florida 33072

ARTICLE III
Purpose(s)

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

To Educate the public on consumer credit; to adjust, negotiate, and settle outstanding debtor financial obligations; To properly distribute debtors' funds to creditors through an agreed program between debtor and creditor; to re-establish debtors' good credit standing; To perform any/all lawful acts relating to consumer credit.

ARTICLE IV
Manner of election of directors

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

Annual election of officers/directors

ARTICLE V

Limitation of corporate powers

The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes, unless limited as follows: Unlimited

ARTICLE VI

Initial registered agent and street address

The name and the street address of the initial registered agent is:

Sherri Sparrow
601 Cypress Lake Blvd., #M,
Pompano Beach, Florida 33064

ARTICLE VII

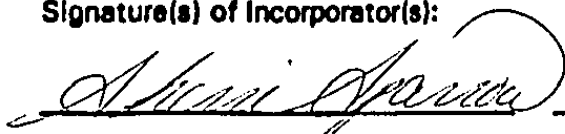
Incorporators

The name(s) and the street address(es) of the incorporator(s) for these articles of incorporation is(are):

Sherri Sparrow
601 Cypress Lake Blvd., #M,
Pompano Beach, Florida 33064

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 3rd day of March ~~May~~, 1995.

Signature(s) of Incorporator(s):



Sherri Sparrow

Typed name of incorporator signing

State of Florida
County of Broward

Acknowledged before me this 3rd day of May, 1995
by Sherri Sparrow. State of Florida Drivers
License used for identification.

Typed name of incorporator signing

Grace B. Babcock
cc#145257

Notary Public, State of Florida
My Commission Expires Sept. 21, 1995
Bonded thru Troy Fain - Insurance Inc.

Typed name of incorporator signing

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Credit Counseling Centers of America, Inc.
(must include suffix)

2. The name and address of the registered agent and office is:

Sherri Sparrow

(Name)

601 Cypress Lake Blvd., #M

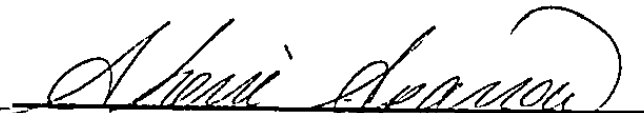
(Street address - P. O. Box not acceptable)

Pompano Beach, Florida 33064

(City/State/Zip)

FILED
95 MAY -8 PM 5:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.



State of Florida (Signature)
County of Broward

May 3, 1995

(Date)

Acknowledged before me this 3rd day of May 1995 by Sherri Sparrow. State of Florida Drivers License used for identification.

 Registered Agent filing fee \$35.00

Grace B. Babcock

CP#145257

Notary Public, State of Florida

My Commission Expires Sept. 21, 1995

Bonded Thru Treco Fain - Insurance Inc.