

N950000002783

TRANSMITTAL LETTER

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

000001496580  
-05/18/95--01004--020  
\*\*\*\*122.50 \*\*\*\*122.50

SUBJECT: CONSUMER CREDIT CONSULTING SERVICES, 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: STEVEN HOFFMAN  
Name (Printed or typed)

651 MAIN STREET  
Address

ALTAMONTE SPRINGS, FL 32701  
City, State & Zip

(407) 644-4620  
Daytime Telephone number

55 JUN -6 PM 3:48

FILED

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

SAB  
6/13/95



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

May 22, 1995

STEVEN HOFFMAN  
651 MAIN ST.  
ALTAMONTE SPRINGS, FL 32701

SUBJECT: CONSUMER CREDIT SERVICES, INC.  
Ref. Number: W95000010714

We have received your document for CONSUMER CREDIT SERVICES, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

According to section 607.0202(1)(b) or 617.0202(1)(b). Florida Statutes, you must list the corporation's principal office, and if different, a mailing address in the document. If the principal address and the registered office address are the same, please indicate so in your document.

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

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 (904) 487-6926.

Sheldon Bream  
Document Specialist

Letter Number: 795A00025937

## ARTICLES OF INCORPORATION

FILED

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

95 JUN -8 PM 3:40  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

### ARTICLE I

#### Name

The name of the corporation shall be:

CONSUMER CREDIT CONSULTING SERVICES, INC.

### ARTICLE II

#### Principal place of business and mailing address

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

651 MAIN STREET  
ALTAMONTE SPRINGS, FL. 32701

### ARTICLE III

#### Purpose(s)

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

TO PROVIDE FINANCIAL & DEBT MANAGEMENT COUNSELING.

### ARTICLE IV

#### Manner of election of directors

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

AS STATED IN THE BYLAWS.

#### ARTICLE V

##### Limitation of corporate powers

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

#### ARTICLE VI

##### Initial registered agent and street address

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

STEVEN HOFFMAN  
651 MAIN STREET  
ALAMONTE SPRINGS, FL 32101

#### ARTICLE VII

##### Incorporators

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

STEVEN HOFFMAN

651 MAIN ST., ALAMONTE SPRINGS, FL. 32701

SHERY BIBEAU

333 E. HILLCREST ST, ALAMONTE SPRINGS FL. 32701

MICHAEL HOFFMAN

3414 CHAPEL SQUARE, SPRING, TX 77388

The undersigned incorporator has executed these Articles of Incorporation this 5<sup>th</sup> day of JUNE, 19 95.

Signature of Incorporator:



/Steven Hoffman

Typed name of incorporator signing

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

PURSUANT TO THE PROVISIONS OF SECTION 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:

CONSUMER CREDIT CONSULTING SERVICES, INC.  
(must include suffix)

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

STEVEN HOFFMAN  
(NAME)

651 MAIN STREET  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

ALAMONTE SPRINGS, FL 32701  
(CITY/STATE/ZIP)

FILED  
65 JUN -6 PM 3:49  
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.*

*S. Hoff*  
(SIGNATURE)

6/14/95  
(DATE)