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Florida Department of State

Division of Corporations

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Katherine Harris, Secretary of State

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To: Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

ALL CREDIT SERVICES, INC.

Certificate of Status	0
Certified Copy	0
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ARTICLES OF INCORPORATION
OF
ALL CREDIT SERVICES, INC.

ARTICLE I - CORPORATE NAME & ADDRESS

The name and address of the corporation ALL CREDIT SERVICES, INC.
located at 3291 WEST SUNRISE BLVD., PO BOX 7484, FT. LAUDERDALE,
FLORIDA 33338

ARTICLE II - DURATION

The corporation shall have perpetual existence.

ARTICLE III - PURPOSE

This corporation is organized for the purpose of transacting any or all-lawful business.

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue ten thousand (10,000) shares of one dollar (\$1.00)
per value common stock.

ARTICLE V - PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the
same kind, class or series as that which he already holds, shall have the right to purchase
her pro rata share thereof (as nearly as may be done without issuance of fractional shares)
at the price at which it is offered to others.

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of 3291 WEST SUNRISE BLVD., PO
BOX 7484, FT. LAUDERDALE, FLORIDA 33338 and the name of the initial registered
agent of this corporation at that address is MATTHEW LYONS
PREPARED BY:

ERIC YANKWITT
1975 EAST SUNRISE BLVD., SUITE 522
FT. LAUDERDALE, FLORIDA 33304
(954) 763-2829

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ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have ONE director initially. The number of Directors may be either increased or diminished from time to time by the Bylaws but shall never be less than one. The name and address of the initial director of this corporation is:

NAME: MATTHEW LYONS

ADDRESS: 3291 WEST SUNRISE BLVD., PO BOX 7484, FT. LAUDERDALE, FLORIDA 33338

ARTICLE VIII - INCORPORATOR

The name and address of the person signing these Articles is MATTHEW LYONS 3291 WEST SUNRISE BLVD., PO BOX 7484, FT. LAUDERDALE, FLORIDA 33338

ARTICLE IX - INDEMNIFICATION

The corporation shall indemnify any Officer or Director, or any former Officer or Director, to the full extent permitted by law

ARTICLE X - AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this Day of , 2000


MATTHEW LYONS

**CERTIFICATE DESIGNATING (OR CHANGING) PLACE OF BUSINESS OR
DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE NAMING
AGENT UPON WHOM PROCESS MAY BE SERVED**

In pursuance of Chapter 607.34 of the Florida Statutes, the following is submitted, in compliance with said act:

First that ALL CREDIT SERVICES, INC. desiring to organize under the laws of the State of Florida with its principle office, as indicated in the Articles of Incorporation at the City of FT. LAUDERDALE, County of BROWARD, State of Florida has named MATTHEW LYONS located 3291 WEST SUNRISE BLVD., PO BOX 7484, FT.

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LAUDERDALE, FLORIDA 33338. county of BROWARD, State of Florida, as its agent
to accept service of process within the state.

ACKNOWLEDGEMENT:

Having been named to accept service of process for the above stated corporation, at the
place designated in this certificate. I hereby accept to act in this capacity, and agree to
comply with the provisions of the said act relative to keeping open said office

By: [Signature]
MATTHEW LYONS, Registered Agent

STATE OF FLORIDA

COUNTY OF BROWARD

BEFORE ME, a Notary Public authorized to take acknowledgments in the state and
county set forth above, personally appeared MATTHEW LYONS, known to me and
known by me to be the person who executed the foregoing Articles of Incorporation, or
who has produced identification as shown below and did take an oath and who
acknowledged his/her execution of the foregoing Articles of Incorporation to be his/her
free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal, in the state
and county aforesaid, this day of

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE

NOTARY PLEASE CHECK ONE:

() PERSON SIGNING DOCUMENT PERSONALLY KNOWN TO ME.

() PERSON SIGNING DOCUMENT PROVIDED THE FOLLOWING FORM
OF IDENTIFICATION

TYPE: _____

SERIAL TYPE: _____

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TALLAHASSEE, FLORIDA

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