## POBBER 13

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

SUBJECT:

900003394829--1 -09/15/00--01059--021 \*\*\*\*\*78.75 \*\*\*\*\*\*78.75

Enclosed is an origina	l and one(1) copy of the articles	of incorporation and a cl	heck for:		
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	■\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	Status  \$87.50  Filing Ferrified & Certified & Certified Status	ee, I Copy icate of	
FROM:	Name (Printed or typed)				
	24 NW 23 Avenue Address			FILI OO SEP 15 SECRETAR SECRETAR	
	Delray Beach, FL 33445  City, State & Zip		· · · · · · · · · · · · · · · · · · ·	M 8: 59	) )
	561-274-3938	Felephone number		哥 59	
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(Proposed corporate name - must include suffix)

American Consolidated Credit Inc.

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

9.90

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

NAME ARTICLE I

The name of the corporation shall be: American Consolidated Credit Inc.

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PRINCIPAL OFFICE ARTICLE II

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

24 NW 23 Avenue 33445 Delray Beach, FL

SHARES ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

50

## INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Crispin M. Schnur 24 NW 23 Avenue 33445 Delray Beach, FL

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

President Crispin M. Schnur 24 NW 23 Avenue Delray Beach, FL 33445

Signature/Incorporator

(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

Signature/Registered Agent

Date