

P00000100151

Florida Department of State  
Division of Corporations  
Public Access System  
Katherine Harris, Secretary of State

**Electronic Filing Cover Sheet**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H00000055985 6)))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

**To:**

Division of Corporations  
Fax Number : (850)922-4001

**From:**

Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346

**FLORIDA PROFIT CORPORATION OR P.A.****GOOD CREDIT CORP.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 OCT 24 PM 4:14

B. McKnight OCT 24 2000

350)487-6013

(850)487-6013  
10/24/00 15:29 F1 Dept of State

p1 /1



**FLORIDA DEPARTMENT OF STATE**  
Katherine Harris  
Secretary of State

October 24, 2000

FAS-T

SUBJECT: GOOD CREDIT CORP.  
REF: W00000025654

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent and street address must be consistent wherever it appears in your document.

If you have any further questions concerning your document, please call (850) 487-6931.

Becky McKnight  
Document Specialist

FAX Aud. #: H00000055985  
Letter Number: 200A00055572

## ARTICLES OF INCORPORATION

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I NAME

The name of the corporation shall be:

Good Credit Corp.

### ARTICLE II PRINCIPLE OFFICE

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

13736 S.W. 152nd Street  
Miami, FL 33177

### ARTICLE III SHARES

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

Five Hundred (500) with a par value at One Dollar (\$ 1.00) each share

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the Initial registered agent is:

LUIS BARRERO ..  
8730 S.W. 32nd Street  
Miami, Florida 33165  
Tel # (305) 228-6789

**ARTICLE V INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

**Rene Bermeosolo**  
8730 S.W. 32<sup>nd</sup> Street  
Miami, Florida 33165

**Luis Barrero**  
619 S.W. 11<sup>th</sup> Avenue, Apt. #3  
Miami, Florida 33130

**ARTICLE VI DIRECTOR(S)**

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

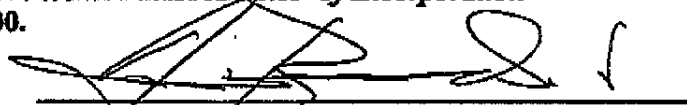
**President**  
**Rene Bermeosolo**  
8730 S.W. 32<sup>nd</sup> Street  
Miami, Florida 33165

**Vice-President/Secretary**  
**Luis Barrero**  
619 S.W. 11<sup>th</sup> Avenue, Apt. #3  
Miami, Florida 33130

*The undersigned incorporator has executed these Articles' of Incorporation  
This 29<sup>th</sup> Day of September, 2000.*



**LUIS BARRERO**

  
**Rene Bermeosolo / President**

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

Pursuant to the provisions of sections 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:

Good Credit Corp.

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

LUIS BARRERO  
8730 S.W. 32<sup>nd</sup> Street  
Miami, Florida 33165

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 OCT 24 PM 4:14

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 \_\_\_\_\_



DATE: OCTOBER 3, 2000