

TRANSMITTAL LETTER

P020000071382

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

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-06/28/02-01014-009
*****78.75 *****78.75

SUBJECT:

NATIONAL DEBT MANAGEMENT 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 of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

RAYMOND A CALIGIURI

Name (Printed or typed)

163 S.W. 15TH ST

Address

DEERFIELD BEACH. FL 33441

City, State & Zip

1-954-486-1390

Daytime Telephone number

02 JUN 27 AM 8:27
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

NATIONAL DEBT Management Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

163 S.W. 15TH ST
DEERFIELD BEACH, FL 33441

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONSUMER DEBT Management

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ARTICLE VI REGISTERED AGENT

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

RAYMOND A CALIGIURI
163 S.W. 15TH ST
DEERFIELD BEACH, FL 33441

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

RAYMOND A CALIGIURI
163 S.W. 15TH ST
DEERFIELD BEACH, FL 33441

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Date

Signature/Incorporator

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA