

P03000019149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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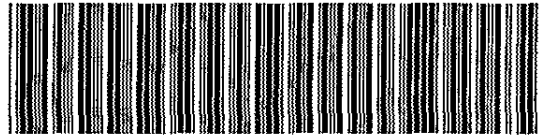
(Business Entity Name)

(Document Number)

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FILED
03 FEB 18 PM 1:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

n03-3596

TRANSMITTAL LETTER

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

SUBJECT: Quality Care Credit, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Jim J. Fields

Name (Printed or typed)

1403 Dunn Avenue Ste 16

Address

Jacksonville, FL 32218

City, State & Zip

904-696-1888

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Ken Detzner
Secretary of State

February 6, 2003

JIM J. FIELDS
1403 DUNN AVENUE
SUITE 16
JACKSONVILLE, FL 32218

SUBJECT: QUALITY CARE CREDIT, INC.
Ref. Number: W03000003596

We have received your document for QUALITY CARE CREDIT, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The articles of incorporation of a nonprofit corporation must be prepared in compliance with section 617.0202, Florida Statutes. Please refer to that section of the law for assistance.

The articles of incorporation must be prepared in compliance with section 607.0202, Florida Statutes. Please refer to this section of the law.

We are enclosing the proper form(s) with instructions for your convenience.

Please return the original and one copy of 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 (850) 245-6972.

Doris Brown
Document Specialist
New Filings Section

Letter Number: 003A00007952

ARTICLES OF INCORPORATION
FOR
QUALITY CARE CREDIT, INC.

FILED
03 FEB 18 PM 1:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We, the undersigned, hereby associate ourselves together for the purpose of becoming incorporated under the laws of the State of Florida and respectfully petition the Secretary of State for approval of such a Corporation under the following proposed Articles of Incorporation:

ARTICLE I - NAME

The name of the Corporation shall be:

QUALITY CARE CREDIT, INC.

ARTICLE II - PURPOSE

This Corporation is organized pursuant to the Florida Profit Corporation Code. The general purpose for which the Corporation is organized and the general nature of business of the corporation shall be for the sole purposes of helping credit challenged individuals repair their credit as well as establish new credit. Other services also include helping the clients to keep their newly repaired credit on track by providing them with credit counseling. **Specific Purposes:** The foregoing purposes will be interpreted as examples only and not as limitations, and nothing therein shall be deemed as prohibiting the corporation from engaging in any lawful act or activity for which a corporation may be organized under the General Corporation Law of Florida.

ARTICLE III – REGISTERED OFFICE

The street address of the registered office is **1403 Dunn Ave. Ste. 16, Jacksonville, FL 32218**. The registered agent at such address is **Jim Fields**.
The county of the registered office is **DUVAL COUNTY**.

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08 FEB 18 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV – INCORPORATOR(S)

<u>NAME</u>	<u>ADDRESS</u>
Jim J. Fields President	409 Jax Estates Drive N. Jacksonville, FL 32218
Youlonda Fields Vice President	409 Jax Estates Drive N. Jacksonville, FL 32218
Delisa Lovings Treasurer	1403 Dunn Ave. Ste 16 Jacksonville, FL 32218

ARTICLE V - MEMBERSHIP

This Corporation will have no members.

ARTICLE VI – MAILING ADDRESS

The principal mailing address of the Corporation is **1403 Dunn Ave. Ste. 16, Jacksonville, FL 32218**.

ARTICLE VII – CAPITAL STOCK

This Corporation holds 500 shares of stock.

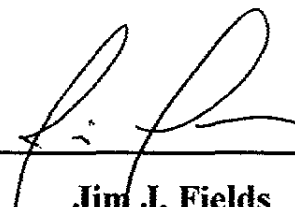
CERTIFICATE DESIGNATING
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of and under the laws of the State of Florida, the Undersigned Corporation submits the following statement in designating the registered office/registered, in the State of Florida.

1. The name of the corporation is:

Quality Care Credit, Inc.

2. I hereby am familiar with and accept the duties and responsibilities as Registered Agent;



Jim J. Fields

In witness whereof, we, the undersigned incorporators, have hereto set our hands and seals for the purpose of forming this professional service corporation under the laws of the State of Florida, and hereby make, subscribe, acknowledge and file with the Department of State of Florida, these Articles of Incorporation this _____ day of _____ 2003.



Jim J. Fields/President



Youlonda Fields/Vice President



Delisa Lovings/ Treasurer

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03 FEB 18 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA