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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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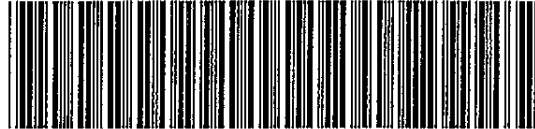
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT:

American Credit Managers, 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:

Robert Palimino
Name (Printed or typed)

2400 W. CYPRESS CREEK Rd - Suite 150
Address

Ft. Lauderdale, FL 33309
City, State & Zip

(954) 937-0520
Daytime Telephone number

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:

American Credit Managers, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*2400 W. Cypress Creek Rd #150
Ft. Lauderdale, FL 33309*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROFIT / REAL ESTATE

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

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

*Robert Palimino
2400 W. Cypress Creek Rd - suite 150
Ft. Lauderdale, FL 33309*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Robert Palimino
2400 W. Cypress Creek Rd - suite 150
Ft. Laud., FL 33309*

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]
Signature/Registered Agent

2-18-04
Date

[Signature]
Signature/Incorporator

2-18-04
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA