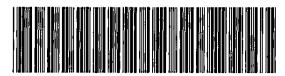
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| Special Instructions to | Filing Officer: | |
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Office Use Only



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SECRETARY OF STATE

1007-10130

COVER LETTER

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

| SUBJECT:A | MERICA BEST (PROPOSED CORPORA | Creclit Sev | ruices IN |
|----------------------|--|---|--|
| | | | |
| Enclosed are an orig | ginal and one (1) copy of the art | icles of incorporation and | a check for: |
| \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED |
| FROM: | EDWIN CA | ARRASQUIIIO (Printed or typed) | ,- , |
| | 13932 Hu | MTWICK IST | عزرو |
| | <u> </u> | $\frac{1}{1}$, $\frac{1}{1}$ 1 | 837 |
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NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED 07 MAR 20 AM 11: 31 DEPARTMENT OF STATE DIVISION OF CORPCRATIONS TALLAHASSEE, FLORIDA

March 2, 2007

EDWIN CARRASQUILLO 13932 HUNTWICK DRIVE ORLANDO, FL 32837

SUBJECT: AMERICA BEST CREDIT SERVICES, INC.

Ref. Number: W07000010730

We have received your document for AMERICA BEST CREDIT SERVICES, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6879.

Ruby Dunlap Regulatory Specialist New Filing Section

Letter Number: 407A00015270

Maure Changed 70: America Best Credit Conseling, INC.

| Ih compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) | , |
|--|-----------------|
| ARTICLE I NAME | r ED ANGE |
| ARTICLE I NAME The name of the corporation shall be: COUNSELING, TNCERT ROLLING, TNCERT ROLL | المتحد |
| ARTICLE I NAME The name of the corporation shall be: America Best Credit Serves, Toc. | |
| ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: | ı |
| 1200 N. CENTRAL AUE SUITE III, KISSIMMER, FL734 | 141 |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: | |
| CRECIT Counseling Profescional Corporation | |
| ARTICLE IV SHARES The number of shares of stock is: | |
| 100 | |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): | |
| EDWIN CARRASOUILD, PRESIDENT | |
| 13932 Huntwick Brive | |
| ORIGNAO, FL 32837 | |
| ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: | |
| FDINIO CARRASQUILO | |
| EDWID CARRASQUILLO 13932 HUNTWICK DRIVE | |
| Oににいらし、十し 32837 ARTICLE VII INCORPORATOR | |
| The name and address of the Incorporator is: | |
| Eximo COPRASOUNID | |
| 13932 HUNTWICK DILIVE OR(aNDO, FL 32837 | |
| DZ(a), +C 32837 | |
| 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 | |
| 2-27-07 | |
| Company / Individual Pate | |