

P07000105799

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

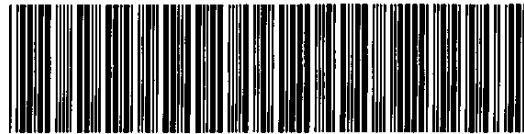
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. WHITE SEP 24 2007

COVER LETTER

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

SUBJECT: United Credit Solution

(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: Hector L Nardo

Name (Printed or typed)

9485 Sunset Drive Suite A-210

Address

Miami, Florida 33173

City, State & Zip

(305) 274-2424

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 30, 2007

HECTOR L NARDO
9485 SUNSET DRIVE
SUITE A-250
MIAMI, FL 33173

2ND MAILING

SUBJECT: UNITED CREDIT SOLUTION
Ref. Number: W07000035179

We have received your document for UNITED CREDIT SOLUTION 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 corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the corrected 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) 245-6933.

Dale White
Document Specialist
New Filing Section

Letter Number: 907A00046018

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:

United Credit Solution **Inc.**

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ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9485 Sunset Drive Suite A-250 Miami, Fl. 33173

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Credit counseling

ARTICLE IV SHARES

The number of shares of stock is:

This Corporation is authorized to issue 100 shares of \$1.00 par value common stock which shall be designated "common shares".

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Hector L Nardo 9485 Sunset Drive Suite A-250 Miami, Fl. 33173
President

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Hector L Nardo 9485 Sunset Drive Suite A-250 Miami, Fl. 33173

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

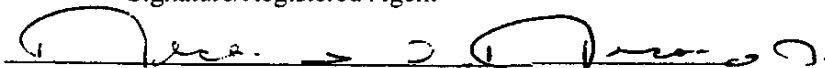
Hector L. Nardo 9485 Sunset Drive Suite A-250 Miami, Fl. 33173

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

07/17/2007

Date


Signature/Incorporator

Date