

P09 0000B3303

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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☐

MAIL

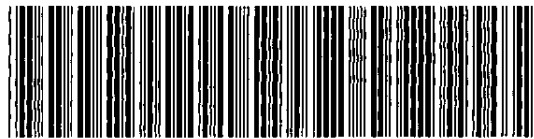
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APR 13 2009

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ORIGINAL

COVER LETTER

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

SUBJECT: QUALITY 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 FIELDS

Name (Printed or typed)

7257 LEM TURNER ROAD

Address

JACKSONVILLE, FLORIDA 32208

City, State & Zip

(619)272-3829

Daytime Telephone number

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

COPY

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:

QUALITY CREDIT INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

7257 LEM TURNER ROAD JACKSONVILLE, FLORIDA 32208
P. O. BOX 26032 JACKSONVILLE, FLORIDA 32226

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CREDIT CONSULTANT, CREDIT COUNSELING, ASSIST CLIENTS WITH APPROVAL PROCESS FOR HOMES, LOANS, CARS, CREDIT CARDS.

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JIM FIELDS, 7257 LEM TURNER ROAD JACKSONVILLE, FLORIDA 32208, PRESIDENT
YOULONDA FIELDS 7257 LEM TURNER ROAD JACKSONVILLE, FLORIDA 32208 VICE PRESIDENT

ARTICLE VI REGISTERED AGENT

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

JIM FIELDS -7257 LEM TURNER ROAD JACKSONVILLE, FLORIDA 32208

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JIM FIELDS -7257 LEM TURNER ROAD JACKSONVILLE, FLORIDA 32208

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

Signature/Incorporator

Date

Date

FILED
09 APR 13 PM 1:04
RECEIVED
CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA