

P090000068639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

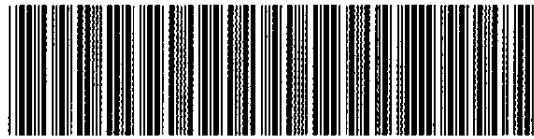
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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8-14-09

## COVER LETTER

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

SUBJECT: ACCORD CREDIT CORP.  
(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: MICHAEL CONSIGLIO  
Name (Printed or typed)

516 NW 97 AVE  
Address

PLANTATION FL 33324  
City, State & Zip

954 83 - 7626  
Daytime Telephone number

ACCORDCREDIT@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

**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:

ACCORD CREDIT CORP.

## ARTICLE II PRINCIPAL OFFICE

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

14080 NW 27 AVE - OPA-LOCKA FL 33054

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FINANCE

## 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):

BERTO ALVAREZ

## ARTICLE VI REGISTERED AGENT

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

MICHAEL Consiglio  
516 NW 97 AVE. PLANTATION FL 33324

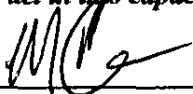
## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

BERTO ALVAREZ  
15990 NW 45 AVE MIAMI FL 33054

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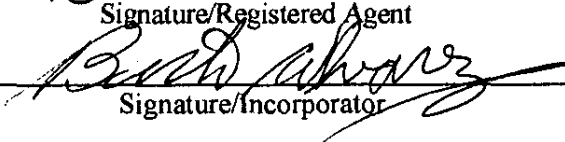
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

8-06-09

Date



Signature/Incorporator

8-06-09

Date

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CLERK OF DISTRICT COURT  
MIAMI ASSOCIATES, FLORIDA