

P97000086779

TRANSMITTAL LETTER

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

SUBJECT: All-4-Credit Restructure Management Services, Inc.
(Proposed corporate name - must include suffix)

100002312261--6
-10/06/97--01064--005
*****78.74 *****78.74

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

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Wayna M. Allen
Name (Printed or typed)

2000 Banks Rd
Address

Margate, Florida 33003
City, State & Zip

Wayna 954-975-7196
DAYTIME Telephone number

AUTHORIZATION BY PHONE TO
CORRECT correct name
DATE 10/8/97
DOC. EXAM 1.11

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

10/8/97-7.41

97 OCT -6 AM 10:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: All-4-Credit Restructure management Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2000 Banks Road
Margate, Florida 33003

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TALLAHASSEE, FLORIDA

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: Walina M. Allen
2000 Banks Rd
Margate, FL 33003

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Walina M. Allen
2000 Banks Rd.
Margate, FL 33063

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

1st day of October, 19 97

(An additional article must be added if an effective date is requested.)



Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is All-4-Credit Restructure Management
services, Inc.

2. The name and address of the registered agent and office is:

Waina M. Allen
(NAME)

2000 Banks Road
(P. O. Box or Mail Drop Box NOT ACCEPTABLE)

Margate, Florida 33063
(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Waina M. Allen
(SIGNATURE)

10-1-97
(DATE)