D9900018715 TRANSMITTAL LETTER

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

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SUBJECT: ≰M	erican Credit (Proposed corpor	counselus rate name - must include suffi		
Enclosed is an origin	al and one(1) copy of the article	es of incorporation and a c	SECRETARY OF TALLAHASSET	
□ \$70.00 Filing Fee	₹\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL COP	S87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM: Poboct E. Lazardick Name (Printed or typed)				
1301 Senindle Blud St. 172				
	Largo City, S	PC 337 State & Zip	70	
12)-585-1678				

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

Daytime Telephone number

ARTICLES OF INCORPORATION 99 F/LF
ARTICLES OF INCORPORATION The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation. 99 **SECRETALY OF SECRETARY OF SECRETAR
ARTICLE I NAME The name of the corporation shall be:
American Credit Counseling Service, Inc.
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:
130) Seminale Blyd. St. 172 LOUGO, FL. 33770
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
1,000,000
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: 1301 Serman Registered Blvd. St. 172.
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are:
Robert Lazarchika. St. 172
Large Fl 33970/23/99
Signature/Dicorporator Date
(An additional article must be added if an effective date is requested.)
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 Signature/Registered Agent Date