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(Re	questor's Name)	<u></u>
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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Florida Secretary of State Secretary of State 409 East Gaines St. Tallahassee, FL 32399

Monday, February 23, 2004

Dear Florida Secretary of State,

Please find enclosed the Certificate of Authority application and fee for Advanced Receivable Solutions, Inc. They have hired Cornerstone Support, Inc. to file this on their behalf. If you have any questions please feel free to call me at 770-587-4595.

Please mail any correspondence to:

Cornerstone Support, Inc.

Attn: Cristy Hall

16 Norcross St.

Suite 101

Roswell, GA 30075.

Cristy Hall

Licensing Specialist

Cornerstone Support, Inc.

ió Norcross Street

Suite 101 Roswell, Georgia 30875

Fax 770.587.2440

770.587.4595

TRANSMITTAL LETTER

-	ation Section n of Corporations			
SUBJECT:	Advanced Receivable	Solutions, Inc.		
,		· - · · · · · · · · · · · · · · · · · ·	tion - must include suffix)	
Dear Sir or Mad	lam:			
"Certificate of E to transact busin	Existence", and check less in Florida.	are submitted t	or Authorization to Transac o register the above referen	
Please return all	correspondence conc	erning this mat	ter to the following:	
-		Cristy H	all	
		(Name	of Person)	
		Cornerstone	Support, Inc.	
		(Finn/C	Company)	- ≠ €'}
		16 Norcross	St. Suite 101	SEC SEC
		(Ad	ldress)	ATT. B
		Roswell,	GA 30075	SER 25 E
		(City/Stat	e and Zip code)	
For further infor	mation concerning th	is matter, please	e call:	2: 00 SIATE LORIDA
Cristy Hall		at (770-587-4595	
(Name	of Person)	(Are	770-587-4595 a Code & Daytime Telepho	one Number)
STREET ADD Registration Sec Division of Corp 409 E. Gaines S Tallahassee, FL Enclosed is a ch	ction porations t.	- amount:	MAILING ADDRESS Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	ns
□ \$70.00 Filing		lling Fee & ate of Status	□ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE 97TH SECTION 60 7.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

lAdvanc	ed Receivable Solutions, Inc.			<u>-</u> .					
words or abbrev	ration; must include the word "INCORPORA viations of like import in language as will cloor partnership if not so contained in the name	early	y indicate						
2DE		_ 3.		20-0365817	7				
(State or country	y under the law of which it is incorporated)			(FEI nun	nber, if applica	ble)			
4. 11/6/	03	_5.		Perpetual					
(Da	te of incorporation)		(Duratio	on: Year corp. v	will cease to ex	ist or "perpetua	1")		
6. upon qualif	fication							-	-
(Date first trans	acted business in Florida. If corporation has (SEE SECTIONS 607.1					pon qualificatio	on.")		
7 1300 Firs	State Blud, Suite A Ne	w C	Castle		DE	19804			
	(Principal office	addı	ress)						
	(Current mailing	addı	ress)			TALLA TALLA		01 EEB	
8. Debt Colle	ection		<u>-</u>	•				$\frac{\pi}{2}$	
(Purpose	(s) of corporation authorized in home state o	r co	untry to b	e carried out in	state of Florida	a) 👸 🗒	<u> </u>	J)	
9. Name <u>and str</u>	<u>eet address</u> of Florida registered age	nt:	(P.O. Bo	ox or Mail Dro	op Box NOT	acceptable)		교 (2	E
Name:	Corporation Service Company					ADA.		2: 00	
Office Address:	1201 Hays Street		<u></u> .		ai.	• •			
	Tallahassee		, F	lorida <u>32301</u>					
	(City)		•	(Zip c	eode)				

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I aM familiar with and accept the obligations of my position as registered agent.

> Allison Quigley, Asst. Vice-President (Registered agent's signature)

I 1. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: Vice Chairman: Address: __ Director: Address: _ Director: _ Address: _ B. OFFICERS President: See Attached List of Officers Vice President: Secretary: _ Treasurer: _ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

(Typed or printed name and capacity of person signing application)



PAGE '

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ADVANCED RECEIVABLE SOLUTIONS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF FEBRUARY, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ADVANCED RECEIVABLE SOLUTIONS, INC." WAS INCORPORATED ON THE SIXTH DAY OF NOVEMBER, A.D. 2003.

AND 1 DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

Warriet Smith Windson
Harriet Smith Windson, Secretary of State
AUTHENTICATION: 2935069

DATE: 02-18-04

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Advanced Receivable Solutions. Inc.

LIST OF OFFICERS

PRESIDENT / DIRECTOR

Jeffrey David Kucharski
1300 First State Blvd., Suite A
Wilmington DE 19804

VICE PRESIDENT / DIRECTOR

Thomas Nusspickel

1300 First State Blvd., Suite A Wilmington DE 19804

TREASURER / DIRECTOR

Thomas S. Novak III

1300 First State Blvd., Suite A
Wilmington DE 19804

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