Florida Department of State

Division of Corporations Public Access System 2005 NOV -4 P 12: 29

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)678-5926

### FOREIGN PROFIT QUALIFICATION

Financial Help Services, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

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

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Financial Help S	ervices, Inc.		TALLAHÁSS
(Enter name of co	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	D,	· "Company," "Corporation,"
(If name unavails	ible in Florida, enter alternate corporate na	me	edopted for the purpose of transacting business in Fiorida)
North Carolina		3.	56-1948686
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)
09/30/1994		5.	Perpetual
(Date	of incorporation)		(Durstion: Year corp. will cease to exist or "perpetual")
	(Date first transacted busines) (SEE SECTIONS 607.1501 & 60	55 ii 7.1:	n Florida, if prior to registration) 502, F.S., to determine penalty liability)
4341 Charlotte H	ighway, Suite 211, Lake Wylie, SC 29710		No. of the Control of
-	(Principal office:		- · - · •
4341 Char	lotte Highway, Suite 211, La		
	(Current mailing	ædd	iress)
Please see	attached.		
(Purpose(s	attached. ) of corporation authorized in home state of	T CI	ountry to be carried out in state of Florida)
	et address of Florida registered agent: (		
Name:	C T Corporation System		
Office Address:	1200 South Pine Island Road		——————————————————————————————————————
	Plantation		Florida 33324
	(City)		, Florida <u>33324</u> (Zip code)
Taving been nam lesignated in this urther agree to c	application, I hereby accept the appoinmely with the provisions of all statute with and accept the obligations of my CT Corporation System	inti es r po	ice of process for the above stated corporation at the placement as registered agent and agree to act in this capacity. The proper and complete performance of my dustition as registered agent.  XINNIE BRYAN PECIAL ASSISTANT SECRETARY

- 11. 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:

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A. DIRECTORS	200e
Chairman:	2005 NOV -4 P 12: 2
Address:	SECRETARY OF STATE TALLAHASSEE, FLORID
Vice Chairman:	
Address:	
Director: Larry H. Goil	18
Address: 4341 Charlot	te Highway, Suite 211
Lake Wylie, S	SC 29710
Director:	
Address:	
B. OFFICERS	
CEO/President: Larry H. Go	
	to Highway, Suite 211
Lake Wylie,	SC 29710
Vice President:	
Address:	
Secretary: Larry H. Go	ins
Address: 4341 Charlot	te Highway, Suite 211 Lake Wylie, SC 29710
Treasurer: Larry H. Go	ins
Address: 4341 Charlot	te Highway, Suite 211 Lake Wylie, SC 29710
_	you may attach an addendum to the application listing additional officers and/or directors.
13.	Signature of Officer listed in number 12 of the application)
14. Larry H. Goins, Pr	
<del></del>	(Typed or printed name and capacity of person signing application)

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Appendix to Florida

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Application by Foreign Corporation for Authorization to Transact Business in Florida.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Purpose Clause of Financial Help Services, Inc.

The purpose for which the corporation is formed is to engage in any lawful act or activity for which corporations may be organized under the North Carolina Business Corporation Act

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## NORTH CAROLINA Department of The Secretary of State

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#### CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

#### FINANCIAL HELP SERVICES, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 30th day of September, 1994, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



Certification#85100527-1 Reference#8012529-ACH Page: 1 of 1 Verify this certificate online at www.secretary.state.no.us/verification IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 2nd day of November, 2005

6 Jaine I Marshall.

Secretary of State