Filing and License Fee: \$310.00 minimum

ID Number: \_\_\_\_\_



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

### **BUSINESS CORPORATION**

#### APPLICATION FOR CERTIFICATE OF AUTHORITY

2008 DEC 29	2000 X
AH III: 00	AID STATE

	APPLIC	ATION FOR CER	TIFICATE OF AUTHORITY	<b>5</b>
Pursuant to the provi corporation hereby ap the following statemen	plies for a Certificate of	-1405 of the General of Authority to transact	Laws of Rhode Island, 1956, as am business in the State of Rhode Islan	ended, the undersigned foreign and for that purpose submits
1. The name of the c	orporation is Californ	nia Recovery Syster	ns, Inc.	
2. It is incorporated u	nder the laws of Cali	fornia		
3. The name, if differ	ent, which it elects to us	se in Rhode Island is:		
"incorporate	of the corporation in d," or "limited," or an a rate endings for use in	abbreviation thereof, t	ncorporation does not contain the hen list the name of the corporation	word "corporation," "company," with the addition of one of the
(b) If the corpor qualify and application:	ate name is not availab transact business in R	ole in Rhode Island, th Rhode Island as state	en set forth below the fictitious name d in the "Fictitious Business Name	under which the corporation will Statement" to be tiled with this
4. The date of its inc	orporation is May 2,	2005	and the period of its duration is	Purpetual V
5. The address of its	principal office in the st	tate or country under t	he laws of which it is incorporated is	<u> </u>
	venue, Suite 960 Sac		D. I. O. V. 100	AH II: 3
6. The address of its	proposed registered of	fice in Rhode Island is	222 Jefferson Blvd., Suite 200	ss, <u>not</u> P.O. Box)
Warwick (Cit	y/Town)	, RI <u>02888</u> (Zip Code)	and the name of its proposed reg	
that address is	National Registered	Agents, Inc.		
		(Na	ime of Agent)	
7. The purpose or pu	rposes which it propos	es to pursue in the tra	nsaction of business in Rhode Island	are:
Debt Collection	S			
8. (a) The names an	•	of its directors (option	nal unless directors are required unde	r the laws of the state or country
	<u>Nan</u>		<u>Address</u>	•
Director	Eric Medrano		777 Madison Ave., Ste. 960 Sacra	
Director	Hay ∠ak		777 Madison Ave., Ste. 960 Sacra	
Director	Steve Cipolla		777 Madison Ave., Ste. 960 Sacra	mento, CA 95841
Director		FILE	<u> </u>	

Form No. 150 Revised: 12/05



		y of which it is ind	Vamę		Address			
-	Dunnisland	=	varno	5777 Madison Ave. Sta	e. 960 Sacramento, CA 95841			
	President Eric Medrano							
	/ice President	Ray Zak Steve Cipolla			5777 Madison Ave., Ste. 960 Sacramento, CA 95841 5777 Madison Ave., Ste. 960 Sacramento, CA 95841			
				5777 Madison Ave., Ste. 960 Sacramento, CA 95841				
•	Secretary	Ray Zak		3777 Wilduson Ave., Ok	2. 300 Gastamento, OA 30041			
	ne aggregate nun nd series, if any, v		nich it has authority t	o issue, itemized by classes, p	par value of shares, shares without par value,  Par Value or Statement that			
	Number of	<u>Shares</u>	<u>Class</u>	<u>Series</u>	Shares are without Par Value			
	10000000		N#	t sould	Shaves are without po			
I0. (a	) An estimate o	of the value of	all property to be o	owned by the corporation fo	r the following year, wherever located, is			
(b	) An estimate of \$ 0.00	of the value of	the corporation's pro	operty to be located within	Rhode Island during the following year is			
(с	located within	expressed as a p this state during t wherever locate	the following year be	ars to the value of all property	alue of the property of the corporation to be of the corporation to be owned during the nultiply by 100 to obtain the percentage].			
11. (a	) An estimate ( \$ <u>0.00</u>	An estimate of the gross amount of business to be transacted by the corporation during the following year is \$ 0.00						
(b		estimate of the gross amount of business to be transacted by the corporation at or from places of business in Rhode and during the following year is \$\frac{0.00}{						
(с	corporation at be transacted	An estimate, expressed as a percentage, of the proportion that the gross amount of business to be transacted by the corporation at or from places of business in this state during the following year bears to the gross amount thereof which will be transacted by the corporation during the following year is $\frac{0.00}{0.00}$ % [divide (b) by (a) and multiply by 100 to obtain the percentage].						
	nis application is which it is incorp		a certificate of Good	Standing issued by the prope	r officer of the state or country under the laws			
13. Th th	is Application for an the 90 <sup>th</sup> day a	Certificate of Au	thority shall be effectis filing	ctive upon filing unless a speci	fied date is provided which shall be no later			
Date:	10/31/6	o8		examined this Application any accompanying at contained herein are true	ury, I declare and affirm that I have on for Certificate of Authority, including tachments, and that all statements and correct.  Thorized Officer of the Corporation			

# State of California Secretary of State

CERTIFICATE OF STATUS

#### ENTITY NAME:

CALIFORNIA RECOVERY SYSTEMS, INC.

FILE NUMBER:

C2744290

FORMATION DATE:

05/02/2005

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of December 22, 2008.

DEBRA BOWEN Secretary of State