Filing Fee: \$150.00

ID Number:	Miles Williams Is a subsance of an arrange of
------------	---



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

LIMITED LIABILITY COMPANY

APPLICATION FOR REGISTRATION

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended, the undersigned

for Isla	foreign limited liability company hereby applies for a Certificate of island, and for that purpose submits the following statement:	Registration to transa	ct business i	n the state of Rhoo	ie
1,	The name of the limited liability company is:				
	Professional Debt Management, LLC				
2,	2. The name, if different, under which it proposes to register and	transact business in R	hode leland i	le:	
3.	The limited liability company is organized under the laws of	MO			
4.	4. The date of its organization is 11/5/08				
5,	5. The period of duration of the limited flability company is (if perp	petual, so state)1	1/05/2	048	
6.	6. The address of the limited liability company's resident agent in	Rhode Island is:		•	
	222 Jefferson Blyd., Suite 200	Warwick	, RI	02888	
	(Street Address, not P.O. Box)	(City/Town)		(Zip Code)	
	and the name of the resident agent at such address isCo	rporation Service Cor (Name of		7	
7.	 The secretary of state is appointed the agent of the foreign if time there is no resident agent or if the resident agent cannot diligence. 	mited liability compan	v för service	of process if at an ercise of reasonable	ıy le
8.	8. The address of any office required to be maintained in the limited flability company is organized is:	state or other jurisdict	ion under th	e laws of which th	10
	7007 NE Parvin Rd., Kansas City, MO 64117			***************************************	
9.	9. The mailing address for the limited liability company is:		Harmond Andrews Providence	kan manana an diaga ta kan an jaka mangkanka an kan dia an manan	
	7007 NE Parvin Rd., Kansas City, MO 64117				
	Form No. 450		FILE	DM	
K6\	Revised: 12/06	I	APR 1.5	2009	
		D.	08/06	114	

	Management of the Limited Liability Company:	
A.	The limited liability company is to be managed by its members. (If you have checked this box, go to item no. 11.)	
		<u>or</u>
В.	The limited liability company is to be company has managers at the time address of each manager.)	e managed \overline{X} by one (1) or more managers. (If the limited liability e of the filling of these Articles of Organization, state the name and
	Manager	<u>Address</u>
	Salvatore Abbott	7007 NE Parvin Rd., Kansas City, MO 64117
1. The	is application is accompanied by a certif horized officer of the jurisdiction under v	icate of good standing duly authenticated by the secretary of state or other which the foreign limited liability company was organized.
1. Th	s application is accompanied by a certif horized officer of the jurisdiction under v	icate of good standing duly authenticated by the secretary of state or other which the foreign limited liability company was organized. Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.

STATE OF MISSOURI



Robin Carnahan Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

PROFESSIONAL DEBT MANAGEMENT, LLC LC0929088

was created under the laws of this State on the 5th day of November, 2008, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 14th day of April, 2009

Secretary of State

Certification Number: 11644146-26 Reference:

Verify this certificate online at http://www.sos.mo.gov/businessentity/verification



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

