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Commonwealth of Kentucky Alison Lundergan Grimes, Secretary of St

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Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Certificate of Authority Foreign Business Entity

FBE

Pursuant to the provisions of KRS Chapter 14A and KRS Chapter 273 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements:

- 1. The entity is a **nonprofit** corporation.
- 2. The name of the entity is **Dallas Association of Credit Management, Inc.**.
- 3. The name of the entity to be used in Kentucky is **Dallas Association of Credit Management, Inc.**.
- 4. The state or country under whose law the entity is organized is **Texas**.
- 5. The date of organization is 10/28/1968.
- 6. The mailing address of the entity's principal office is **751 Plaza Blvd**, **Coppell**, **TX 75019**.
- 7. The street address of the entity's registered office in Kentucky is **436 S 7th St Ste 300**, **Louisville**, **KY 40203** and the name of the registered agent in that office is **Faye Goodman**.
- 8. The names and business addresses of the entity's representatives:

Abby Odneal

751 Plaza Blvd, Coppell, TX 75019

- 9. I certify that, as of the date of filing of this application, the above-named entity validly exists under the laws of the jurisdiction of its formation.
- 10. This application will be effective on filing.

Signature of Authorized Representative: **Abby Odneal**

I, **Faye Goodman**, consent to serve as the Registered Agent on behalf of the business entity.

Signature of Registered Agent or individual signing on behalf of the company serving as Registered Agent:

Faye Goodman