

# State of Idaho

Office of the Secretary of State

**CERTIFICATE OF AUTHORITY  
OF  
PIONEER CREDIT RECOVERY, INC.**

File Number C 140180

I PETE T. CENARRUSA, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Business Corporation Act, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: August 6, 2001



*Pete T. Cenarrusa*  
SECRETARY OF STATE

By *Natalie Tenintz*



# APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

21 AUG -6 AM 10:47  
SECRETARY OF STATE  
STATE OF IDAHO

The undersigned Corporation applies for a Certificate of Authority and states as follows:

1. The name of the corporation is: Pioneer Credit Recovery, Inc.
2. The name which it shall use in Idaho is: Pioneer Credit Recovery, Inc.
3. It is incorporated under the laws of: New York State
4. Its date of incorporation is: 7-1-85
5. The address of its principal office is: 26 Edward St., Arcade, NY 14009
6. The address to which correspondence should be addressed, if different from item 5, is:  
P.O. Box 100, Arcade, NY 14009
7. The street address of its registered office in Idaho is: 2691 N. Bobcat Way, P.O. Box 1342  
Meridian, ID 83680, and its registered agent in Idaho at that address is: Betty Nichols ~~dba The Perfect Solution~~

8. The names and respective business addresses of its directors and officers are:

Name	Office	Address
<u>Kathleen M. Balus</u>	<u>Pres/CEO</u>	<u>26 Edward St., Arcade NY 14009</u>
<u>Mark Balus</u>	<u>Exec. Vice Pres</u>	<u>26 Edward St., Arcade, NY 14009</u>
<u>Everett Stagg</u>	<u>Sec/COO</u>	<u>26 Edward St., Arcade, NY 14009</u>
<u>Joan Ludwick</u>	<u>Treas/CEO</u>	<u>26 Edward St., Arcade NY 14009</u>
_____	_____	_____
_____	_____	_____

Dated: August 3, 2001

Signature: *Kathleen M. Balus*

Typed Name: Kathleen M. Balus

Capacity: President/CEO

Customer Acct # :

(if using pre-paid account)

Secretary of State use only

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State of New York } ss:  
Department of State

01 AUG -6  
I hereby certify, that the Certificate of Incorporation of PIONEER CREDIT RECOVERY, INC. was filed on 07/01/1985, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

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Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 31st day of July  
two thousand and one.



Special Deputy Secretary of State

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