

State of Illinois Credit Services Organization Registration Statement

Required by Public Act 85-1384, effective Jan. 1, 1989, 815 ILCS 605/9 — \$100 Filing Fee



Secretary of State Index Department
111 E. Monroe
Springfield, IL 62756
217-782-7017
www.cyberdriveillinois.com

When a change in the information contained in this statement occurs, the credit services organization is required to file an amended statement within 90 days. There is no fee for filing amended statements.

A credit services organization is required to continuously maintain a \$100,000 surety bond **if** that organization **charges or receives any money or other valuable consideration prior** to full and complete performance of the services the organization has agreed to perform. A bond also shall be maintained for two years after the date the organization ceases operations.

A file-stamped copy of this statement will be returned to the credit services organization who must maintain the copy in their files and allow a buyer to inspect the registration statement.

1. Name and Address of the Credit Services Organization:

2. Name and Address of the Registered Agent of Individual Authorized to Accept Service of Process on Behalf of the Credit Services Organization:

3. Name and Address of All Persons Who Directly or Indirectly Own or Control 10 Percent or More of the Outstanding Shares of Stock in the Credit Services Organization: (If more space is needed, attach additional sheets of this size.)

4. If any, the Bond Number, Name and Location of the Surety Company Issuing a \$100,000 Surety Bond as Required by the Credit Services Organizations Act:

5. (A) Has there been any litigation or unresolved complaint filed with a governmental authority of this state, any other state or the United States relating to the operation of this Credit Services Organization?

Yes — If yes, attach a full disclosure.

No

(B) If there has been no litigation or unresolved complaint filed, the statement must be completed and notarized.

I, _____, _____
Name Official Capacity

of _____
Name of Credit Services Organization

do hereby affirm that there has been no litigation or unresolved complaint filed with a governmental authority of this state, any other state or the United States relating to the operation of this Credit Services Organization.

Signature

Subscribed and affirmed before me on _____, _____

Signature of Notary Public

Seal

6. I do hereby affirm that the foregoing statements and any attachments are true and correct.

Signature

Official Capacity

Subscribed and affirmed before me on _____, _____

Signature of Notary Public

Seal

**Return completed form and \$100 filing fee to:
Secretary of State, Index Department, 111 E. Monroe, Springfield, IL 62756 • 217-782-7017**