

SFL Notary & Credit Solutions, LLC
Notary - Credit Repair – Document Preparation

Return Address:

PO BOX 17864 | PLANTATION, FL 33318

Contact: (407) 796-1776

emailus@sflncs.com | www.sflncs.com



Limited Power of Attorney

I/ We, [Name(s)] _____, resident(s) of _____ designate SFL Notary & Credit Solutions, also known as SFL NCS (“Agent”), of PO BOX 17864, Plantation, FL 33318, its officers, employees and agents, as my attorney-in-fact (referred to as “the Agent”) on the following terms and conditions only:

1. **Authority to Act.** The Agent is authorized to act for me under this Limited Power of Attorney as described herein.
2. **Limited Powers of Agent.** The Agent may act and exercise power, authority and control on my behalf, with regard to the assistance in disputing/challenging inaccurate, obsolete and unverifiable information on my credit bureau reports, limited to the following enumerated powers only:
 - a. **Signatory Rights.** Signing of correspondence addressed to the credit bureaus, signing of correspondence addressed to creditors, obtaining credit information over the telephone, fax, and internet, through written or online correspondence from credit bureaus, creditors or collection agencies.
 - b. **Authority to Request Information.** To requested information upon the presentation of this durable LPA for limited purposes, including but not limited to, the Custodian of records, Repository of the Court Records, Credit Bureau (TransUnion, Equifax, Experian), consumer reporting agencies, retail business establishments, lending institutions, student loan agencies (public and/or private), including whatever kind.
 - c. **Delegation of Authority.** If mediation of a debt is necessary, I/we give Agent, the right to discuss information to help resolve a dispute.
3. **Reliance by Third Parties.** Third parties may rely upon the representations of the Agent as to all matters regarding limited powers granted to Agent herein. No person who acts in reliance on the representations of the or the authority granted under this Limited Power of Attorney shall incur any liability to me or to my heirs, family or associates, for permitting the Agent to exercise any power prior to actual knowledge that the Limited Power of Attorney has been revoked or terminated by operation of law or otherwise.
4. **Indemnification of Agent.** No Agent named in this power shall incur any liability to me for acting under this limited power, except for such agent's own misconduct or negligence. I/we agree to indemnify and hold harmless any agent named in this power for any court costs, civil judgments, or reasonable attorney fees that are incurred as a result of exercising the limited powers described herein.
5. **Durability.** This Limited Power of Attorney shall expire six (6) months from the date of execution as set forth below.
6. **Termination.** Irrespective of the stated term hereof, I/we may terminate this Agreement at any time without cause upon five (5) days' written notice to the Agent. In the event of termination, Agent shall cease all activity immediately.
7. **Binding Effect.** This Limited Power of Attorney shall be binding on and insure to the benefit of the parties to this power their heirs, personal representatives, successors and assigns except as otherwise provide in this Limited Power of Attorney.
8. **Governing Law.** The validity, interpretation and performance of this Limited power of Attorney and any dispute connected herewith shall be governed by and construed in accordance with the laws of the State of Florida.

9. **Venue.** Any action whether a suit at law or arbitration under the terms of this Agreement shall be brought in the Broward County Clerk of Courts in Fort Lauderdale in the State of Florida for the County of Broward and within the County of Broward.

IN WITNESS, WEREOF, by signing this instrument I/we affirm all that is written above.

Dated: _____

Signature: _____

Name: _____

NOTICE OF CANCELLATION:

YOU MAY CANCEL THIS CONTRACT, WITHOUT ANY PENALTY OR OBLIGATION, AT ANY TIME BEFORE MIDNIGHT OF THE 5TH DAY WHICH BEGINS AFTER THE DATE THE CONTRACT IS SIGNED BY YOU. SEE THE ATTACHED NOTICE OF CANCELLATION FORM FOR AN EXPLANATION OF THIS RIGHT.

Client Signature: _____ Date: _____

Printed Name: _____



Credit Improvement Services Agreement

SFL NCS, as an entity that counsels, educates and works in conjunction with clients to assist in disputing/challenging inaccurate, obsolete and unverifiable information on their credit bureau reports, enters into agreement with client to offer said services. Client agrees that SFL NCS is not held liable nor can be held responsible for accurate information that is included in client credit report that is not removed.

Client agrees that no promises regarding actual results have been made, stated, written or implied. SFL NCS will work with due diligence in representing client to dispute/challenge, advise, educate and to ultimately help improve overall client credit worthiness.

Both parties agree that effective and long term sustained credit worthiness, is based upon consistent payment of obligated loan arrangements, overall credit management, and an updated understanding of applicable laws and regulations. This Business Agreement shall be governed by the laws of the State of Florida. All parties agree Broward County, Florida shall be the proper venue for any litigation.

Five day Right of Recession:

You may cancel this contract without penalty or obligation, at any time before midnight of the 5th day which begins after the date the contract is signed by you. To cancel this contract, mail or deliver a signed statement, stating you would like to cancel this agreement to the following address:

SFL Notary & Credit Solutions
PO BOX 17864
Plantation, FL 33318

1) Client understands that any new negative information, incurred after our process begins, will negate any positive results attained by SFL NCS.

2) Client understands that if they cancel services after the “five day right of recession”, but before original reports are received, they will be subject to a \$75 fee, for all services rendered prior to cancellation. This includes, but is not limited to: Consultant time explaining our Services and Processes, Emailing or Faxing of information etc.

3) Any checks returned NSF (Bad Check) or disputed card payments or for any other reason will nullify this Money Back Guarantee.

4) In the event of any dispute between the parties regarding a term or terms of the Agreement, the parties agree to use their best efforts in good faith to resolve the dispute between them. If necessary, but in the sole judgment of each party, the parties will consider using alternative dispute resolution, including mediation, before resorting to litigation. In such instance, a breach thereof shall be appointed by and settled before a Judge of the Broward County Clerk of Courts upon the petition of any party. Any action arbitrated under the terms of this Agreement shall be brought in the Broward County Clerk of Courts for the County of Broward within the County of Broward. A judgment on the award rendered by the Judge may be entered in any court having jurisdiction.

“Basic Package” This program is a 60 day program designed for 2 rounds of challenges to the bureaus and creditors. Total: \$600 - 2 installments of \$300 within 30 days. Initial payment will be the deposit credited towards the balance.

“Level Up Package” This program is a 90 day program designed for 3 rounds of challenges to the bureaus and creditors. Total: \$900 - 3 installments of \$300 within 45 days. Initial payment will be the deposit credited towards the balance.

“Premier Level Up Package” This program is a 120 day program designed for 4 rounds of challenges to the bureaus and creditors. Total: \$1,200 - 3 installments of \$400 within 60 days. Initial payment will be the deposit credited towards the balance.

“Special Delivery Package” This program is a 180 day program designed for 6 rounds of challenges to the bureaus and creditors. Total: \$2,000 - 4 installments of \$500 within 90 days. Initial payment will be the deposit credited towards the balance.

Client agrees to: **(please initial #4 & #5)**

- 1) Contact SFL Notary & Credit Solutions concerning any reports not received.
- 2) Understand that our packages are designed to assist in the repair and removal of inaccurate credit reporting information and does not guarantee all results will be the same as stated when initiating our process.
- 3) Client agrees that they have received the SFL NCS Privacy Policy and Limited Power of Attorney Agreement and agreed to it in writing and/or digitally, which is a separate document and have read, understood and will agree to comply with the requirements thereof.
- 4) _____ Client agrees to open secure or unsecure credit cards if that is what SFL NCS recommends to them and the client will work to the best of their ability, on lowering their “debt to credit ratio” (Credit Card Balances should be below 50% balance to limit ratio and more ideally 30%). Please ask an SFL NCS consultant to explain this further if you do not understand. This will help to “optimize our results.” If a client does not do the above as recommended by SFL NCS this will null and void the guarantee. It is imperative that the client take an active role and establish trade-lines – not doing so will impede the results of the program.
- 5) _____ Client also agrees that if any new derogatory trade-lines appear (this includes new collections, new judgments and late payments) on their credit file while they are in the program our guarantee that we have offered you upfront will become null and void and additional payments may be needed to resolve new derogatory information..

Please Provide Three Forms of Identification

- i. Copy of your Driver’s License or any other official picture ID ie. Passport.
- ii. Copy of any bill showing your name and current address.
- iii. Copy of your social security card with matching name.

Client Information

Full Name:

Phone Number:

Current Address:

E-mail Address:

Date of Birth:

Social Security Number:

Print Name _____

Signature _____

Date: _____

NOTICE OF CANCELLATION

You may cancel this contract, without any penalty or obligation, at any time before midnight of the 5th day which begins after the date the contract is signed by you. To cancel this contract, mail or deliver a signed dated copy of this cancellation notice, or any other written notice, to SFL Notary & Credit Solutions LLC. at PO BOX 17864, Plantation, FL 33318 before midnight on, _____. I hereby cancel this transaction,

Client Signature: _____ Date: _____

Printed Name: _____

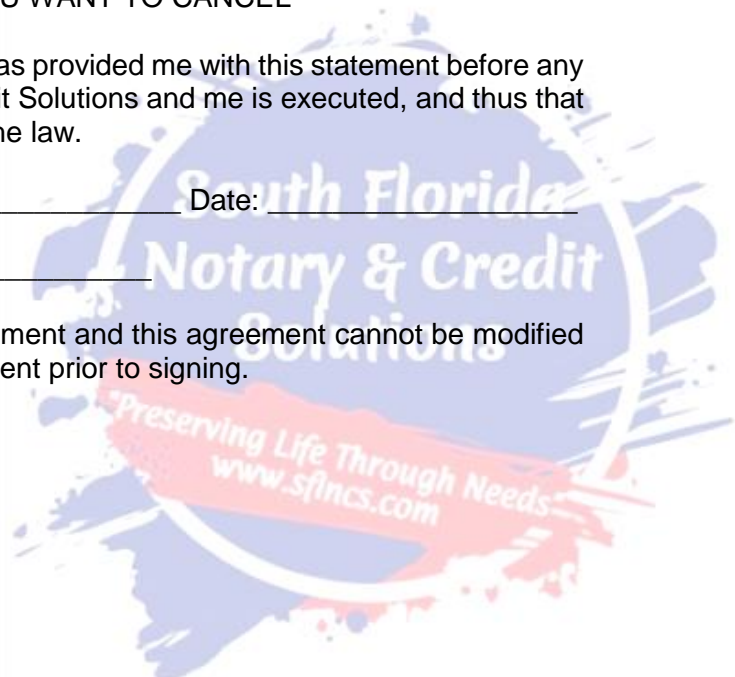
DO NOT SIGN UNLESS YOU WANT TO CANCEL

I acknowledge that SFL Notary & Credit Solutions has provided me with this statement before any contract or agreement between SFL Notary & Credit Solutions and me is executed, and thus that I have received this statement in compliance with the law.

Client Signature: _____ Date: _____

Printed Name: _____

No verbal communication will supersede this agreement and this agreement cannot be modified in any way. I have read and understand this document prior to signing.



NOTICE OF CANCELLATION (DUPLICATE)

You may cancel this contract, without any penalty or obligation, at any time before midnight of the 5th day which begins after the date the contract is signed by you. To cancel this contract, mail or deliver a signed dated copy of this cancellation notice, or any other written notice, to SFL Notary & Credit Solutions LLC. at PO BOX 17864, Plantation, FL 33318 before midnight on, _____ . I hereby cancel this transaction,

Client Signature: _____ Date: _____

Printed Name: _____

DO NOT SIGN UNLESS YOU WANT TO CANCEL

I acknowledge that SFL Notary & Credit Solutions has provided me with this statement before any contract or agreement between SFL Notary & Credit Solutions and me is executed, and thus that I have received this statement in compliance with the law.

Client Signature: _____ Date: _____

Printed Name: _____

No verbal communication will supersede this agreement and this agreement cannot be modified in any way. I have read and understand this document prior to signing.

PLEASE RETAIN THIS COPY FOR YOUR RECORDS



Consumer Credit File Rights Under State and Federal Law

You have a right to dispute inaccurate information in your credit report by contacting the credit bureau directly. However, neither you nor any "credit repair" company or credit repair organization has the right to have accurate, current, and verifiable information removed from your credit report. The credit bureau must remove accurate, negative information from your report only if it is over 7 years old. Bankruptcy information can be reported for 10 years. You have a right to obtain a copy of your credit report from a credit bureau. You may be charged a reasonable fee. There is no fee, however, if you have been turned down for credit, employment, insurance, or a rental dwelling because of information in your credit report within the preceding 60 days. The credit bureau must provide someone to help you interpret the information in your credit file. You are entitled to receive a free copy of your credit report if you are unemployed and intend to apply for employment in the next 60 days, if you are a recipient of public welfare assistance, or if you have reason to believe that there is inaccurate information in your credit report due to fraud. You have a right to sue a credit repair organization that violates the Credit Repair Organization Act. This law prohibits deceptive practices by credit repair organizations. You have the right to cancel your contract with any credit repair organization for any reason within 3 business days from the date you signed it. Credit bureaus are required to follow reasonable procedures to ensure that the information they report is accurate. However, mistakes may occur. You may, on your own, notify a credit bureau in writing that you dispute the accuracy of information in your credit file. The credit bureau must then reinvestigate and modify or remove inaccurate or incomplete information. The credit bureau may not charge any fee for this service. Any pertinent information and copies of all documents you have concerning an error should be given to the credit bureau. If the credit bureau's reinvestigation does not resolve the dispute to your satisfaction, you may send a brief statement to the credit bureau, to be kept in your file, explaining why you think the record is inaccurate. The credit bureau must include a summary of your statement about disputed information with any report it issues about you. The Federal Trade Commission regulates credit bureaus and credit repair organizations. For more information contact: The Public Reference Branch Federal Trade Commission Washington, D.C. 20580 Additional Disclosures: There are non-profit organizations (including nonprofit credit counseling services) available that are funded by client fees, grants, other voluntary contributions from creditors. Florida residents: Consumers may request a copy of their consumer file without charge from a consumer reporting agency not later than the 30th day after the date on which the agency receives notice the consumer has been denied credit. Consumers may review information in their consumer file for a minimal charge at any other time. A consumer reporting agency is prevented from issuing a report containing obsolete information. I acknowledge that SFL Notary & Credit Solutions has provided me with this statement before any contract or agreement between SFL Notary & Credit Solutions and me is executed, and thus that I have received this statement in compliance with the law.

Client Signature: _____ Date: _____

Printed Name: _____

