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TRANSMITTAL LETTER

FILED

02 JAN 18 AM 10:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

500004785205--3  
-01/18/02--01071--004  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: RECOVER ALL  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee &  
Certificate of  
Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: RECOVER ALL  
Name (Printed or typed)

524 9th STREET SOUTH  
Address

ST. PETERSBURG FL. 33702  
City, State & Zip

727-823-4691  
Daytime Telephone number

Cynthia Bell NOTE: PLEASE provide the original and one copy of the articles.  
AUTHORIZATION BY PHONE TO  
CORRECT Articles, I, III & IV  
DATE 1-25-02  
DOC. EXAM CB

CD1-25

# ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

## ARTICLE I NAME

The name of the corporation shall be:

RECOVER ALL INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

524 9th STREET SOUTH  
ST. PETERSBURG FL. 33702

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THIS CORPORATION IS FOR RELIGIOUS TEACHING TO INDIVIDUALS.

## ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

THE DIRECTORS ARE ELECTED AS STATED IN THE BY-LAWS.

## ARTICLE V INITIAL DIRECTORS/OFFICERS

The name and addresses:

DR. L.S. BELL FOUNDER/DIRECTOR, 12100 PARK BLVD. SEMINOLE FL. 33772  
REV. CYNTHIA BELL, DIRECTOR 12100 PARK BLVD. SEMINOLE, FL. 33772  
MIN. ROBERT TYSON 524 9th STREET SOUTH, ST. PETERSBURG FL. 33702

## ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

CYNTHIA BELL, 12100 PARK BLVD. #507, SEMINOLE FL. 33772

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DR. L.S. BELL, 12100 PARK BLVD. # 507, SEMINOLE FL. 33772

\*\*\*\*\*  
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*

Cynthia Bell  
Signature/Registered Agent

12/28/01  
Date

DR. L.S. BELL  
Signature/Incorporator

12/28/01  
Date

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