

P 8000000 42638
TRANSMITTAL LETTER

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

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-04/27/00--01070--005
*****78.75 *****78.75

SUBJECT: St. James Associates, Inc.
(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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Stephen Billiot
Name (Printed or typed)

11805 Royal Palm Blvd #202
Address

Coral Springs Fl 33065
City, State & Zip

954-575-3174
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 APR 27 PM 3:33

FILED

F. CHESLER

APR 27 2000

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

ST. JAMES ASSOCIATES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11805 Royal Palm Blvd #202
Coral Springs FL 33065

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Debt Recovery; collection, mediation, resolution of Debt issues
Credit Services related to debt collection - informational Svcs.

ARTICLE IV SHARES

The number of shares of stock is:

100,000.000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

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

S.J. Billiot
11805 Royal Palm Blvd #202
Coral Springs FL 33065

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Stephen J. Billiot
11805 Royal Palm Blvd #202
Coral Springs FL 33065

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

Signature/Registered Agent

Date

Signature/Incorporator

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 APR 27 PM 3:33

FILED