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FILED

01 MAY 11 AM 9:14

SECRETARY OF STATE
TALLAHASSEE FLORIDA

May 7, 2001

Secretary of State
Division of Corporation
P. O. Box 6237
Tallahassee, FL 32314

Re: Statewide Recovery Consignment & Sales Inc.

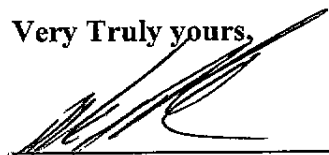
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-05/11/01--01097--004
*****78.75 *****78.75

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with our check in the amount of \$78.75.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named Corporation.

Very Truly yours,


Michael Parker

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D. WHITE MAY 17 2001

Statewide Recovery Consignment & Sales Inc.
3075 Fowler Street
Fort Myers, FL 33901

ARTICLES OF INCORPORATION

of

Statewide Recovery Consignment & Sales Inc.

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

Statewide Recovery Consignment & Sales Inc.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue One Hundred shares (100) of Stock Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

| | | | |
|---------|--------------------|---------|-----------|
| NAME | Gino Proia | | |
| ADDRESS | 3075 Fowler Street | | |
| CITY | Fort Myers | FLORIDA | ZIP 33901 |

The principal office, if known, or the mailing address of the corporation is:

| | | | |
|---------|---|---------|-----------|
| NAME | Statewide Recovery Consignment & Sales Inc. | | |
| ADDRESS | 3075 Fowler Street | | |
| CITY | Fort Myers | FLORIDA | ZIP 33901 |

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have Three (3) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

| | | | |
|---------|----------------------|----------|-----------|
| NAME | Michael Parker | | |
| ADDRESS | 613 Astarias Circle | | |
| CITY | Fort Myers | STATE FL | ZIP 33919 |
| NAME | Gary Proia | | |
| ADDRESS | 5280 Fairfield Drive | | |
| CITY | Fort Myers | STATE FL | ZIP 33919 |
| NAME | Gino Proia | | |
| ADDRESS | 3075 Fowler Street | | |
| CITY | Fort Meyrs | STATE FL | ZIP 33901 |




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ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

| | | | |
|---------|----------------------|-------|--------------|
| NAME | Michael Parker | | |
| ADDRESS | 613 Astarias Circle | | |
| CITY | Fort Myers | STATE | FL ZIP 33919 |
| NAME | Gary Proia | | |
| ADDRESS | 5280 Fairfiled Drive | | |
| CITY | Fort Myers | STATE | FL ZIP 33919 |
| NAME | Gino Proia | | |
| ADDRESS | 3075 Fowler Street | | |
| CITY | Fort Myers | STATE | FL ZIP 33901 |

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 7th day of May, ~~x19~~ 2001

 (Seal)
 (Seal)
 (Seal)

STATE OF FLORIDA)
COUNTY OF _____) SS

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared:

| | |
|--------------------|---------------------------------|
| _____ Signature | _____ Form of Identification |
| _____ Signature | _____ Form of Identification |
| _____ Signature | _____ Form of Identification |

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that _____ executed these Articles of Incorporation, that I relied upon the form _____ of identification of the above named person _____ as indicated opposite each name, and that an oath (was)(was not) taken.

NOTARY RUBBER STAMP SEAL Witness my hand and official seal in the County and State last aforesaid this _____ day of _____, 19_____

Notary Signature

Printed Notary Signature

CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Statewide Recovery Consignment & Sales Inc.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at 3075 Fowler Street

Fort Myers, FL 33901

has named Gino Proia

located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above
stated corporation at the place designated in this certificate, and being familiar with
the obligations of that position, I hereby accept to act in this capacity, and agree to
comply with the provisions of Florida Law in keeping open said office.


(registered agent)