

TRANSMITTAL LETTER  
**P01000075215**

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

FILED  
JUL 26 PM 2:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT:

THE COLLINS CORPORATION of North East  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Florida

300004499883--6

-07/26/01--01049--011

\*\*\*\*\*87.50 \*\*\*\*\*87.50

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:

DEBRA L. COLLINS

Name (Printed or typed)

5 Sawgrass Village Dr

Address

Ponte Vedra Bch, FL 32082

City, State & Zip

904-285-5000 X132

Daytime Telephone number

Debra Collins

AUTHORIZATION BY PHONE TO

CORRECT Name

DATE 7/31 @ 1:51pm

DOC. EXAM J. Bryan

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

J. BRYAN JUL 30 2001

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FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

July 30, 2001

DEBRA L. COLLINS  
5 SAWGRASS VILLAGE DR.  
PONTE VEDRA BEACH, FL 32082

SUBJECT: THE COLLINS CORPORATION  
Ref. Number: W01000017457

We have received your document for THE COLLINS CORPORATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6929.

Joey Bryan  
Document Specialist  
New Filing Section

Letter Number: 901A00043934

# 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:

THE COLLINS CORPORATION of North East Florida

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5 Sawgrass Village DR  
Ponte Vedra Beach, FL 32082

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Corporation for self employed sales person

## ARTICLE IV SHARES

The number of shares of stock is: 1000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

DEBRA L. COLLINS  
5 Sawgrass Village DR  
Ponte Vedra Bch, FL 32082

## ARTICLE VI REGISTERED AGENT

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

DEBRA L. COLLINS  
5 Sawgrass Village DR  
Ponte Vedra Bch, FL 32082

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DEBRA L. COLLINS  
5 Sawgrass Village DR  
Ponte Vedra Bch, FL 32082

\*\*\*\*\*  
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

DEBRA L. COLLINS  
Signature/Registered Agent DEBRA L. COLLINS

7/24/01  
Date

DEBRA L. COLLINS  
Signature/Incorporator DEBRA L. COLLINS

7/24/01  
Date