

TRANSMITTAL LETTER

P01000099602

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

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-10/12/01--01027--005
*****87.50 *****87.50

SUBJECT: Losinger & Losinger Judgment Recovery Specialists, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Tina G. Losinger
Name (Printed or typed)

3859 Wekiva Springs Road, Suite 307
Address

Longwood, FL 32779
City, State & Zip

(407) 884-8000
Daytime Telephone number

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
01 OCT 12 AM 7:17

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

F. 01-23-2001 OCT 12 2001

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:

Losinger & Losinger Judgment Recovery Specialists, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Business: 1127 Oakpoint Circle, Apopka, FL 32712

Mailing: 3859 Wekiva Springs Road, Suite 307, Longwood, FL 32779

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide a service to assist judgment holders with the enforcement of their court-awarded judgments.

ARTICLE IV SHARES

The number of shares of stock is:

ONE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

① Tina G. Losinger, President

② James G. Losinger, Vice President

3859 Wekiva Springs Road, Suite 307, Longwood, FL 32779

ARTICLE VI REGISTERED AGENT

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

Tina G. Losinger

3859 Wekiva Springs Road, Suite 307, Longwood, FL 32779

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tina G. Losinger

3859 Wekiva Springs Road, Suite 307, Longwood, FL 32779

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

Tina G. Losinger
Signature/Registered Agent

10/10/01
Date

Tina G. Losinger
Signature/Incorporator

10/10/01
Date

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