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TRANSMITTAL LETTER

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

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-10/22/01--01078--011
*****78.75 *****78.75

SUBJECT: WELLSPRING RECOVERY 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: JOHN D. LEE
Name (Printed or typed)
P.O. BOX 261
Address
PONTE VEDRA BEACH, FL 32004
City, State & Zip
(904) 273-4232
Daytime Telephone number

FILED
01 OCT 22 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

PS, 10/23/01 -

ARTICLES OF INCORPORATION

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

FILED

01 OCT 22 PM 2:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

WELLSPRING RECOVERY INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. BOX 261
PONTE VEDRA BEACH, FL 32004

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE OPPORTUNITIES FOR INVESTMENT AND EQUITY BUILDING
THROUGH SERVICES AND CONSULTING TO INDIVIDUALS AND OTHER BUSINESSES.

ARTICLE IV SHARES

The number of shares of stock is:

1,000 SHARES OF STOCK

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

JOHN D. LEE DIRECTOR

ARTICLE VI REGISTERED AGENT

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

JOHN D. LEE
245 LINN STOE CIRCLE
PONTE VEDRA BEACH, FL 32082

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JOHN D. LEE
P.O. BOX 261
PONTE VEDRA BEACH, FL 32004

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