

TRANSMITTAL LETTER

P010000105412

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

SUBJECT:

Professional Recovery Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

4000004626784--1

-10/08/01--01053--011

*****70.00 *****70.00

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:

James N. Stanley

Name (Printed or typed)

351 NW LeJeune Rd, #201

Address

Miami, FL 33126

City, State & Zip

(305) 631-1911

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 OCT 31 AM 8:28

FILED
OCT 31 2001
TALLAHASSEE, FLORIDA

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

T. Burch NOV 1 2001



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

October 9, 2001

JAMES N STANLEY
351 NW LEJEUNE RD #201
MIAMI, FL 33126

SUBJECT: PROFESSIONAL RECOVERY, INC.
Ref. Number: W01000023440

We have received your document for PROFESSIONAL RECOVERY, INC. and your check(s) totaling \$70.00. 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) 245-6928.

Tim Burch
Document Specialist
New Filing Section

Letter Number: 101A00056326

FILED
01 OCT 31 AM 8:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**ARTICLES OF INCORPORATION OF
PROFESSIONAL RECOVERY ASSOCIATES, INC.**

Comes now, the undersigned subscriber to these Articles of Incorporation, for the purpose of forming a corporation under and in accordance with the Florida Business Corporation Act, and hereby adopts the following Articles of Incorporation for such corporation:

ARTICLE I. NAME

The name of this corporation is Professional Recovery Associates, Inc.

ARTICLE II. PURPOSE AND NATURE OF BUSINESS

The purpose of the Corporation and the nature of its business are as follows:

1. To engage in any and all lawful activities under the laws of the State of Florida and to provide services incident thereto.
2. To own property, enter into contracts and carry on any activity necessary or incidental to the accomplishment of furtherance of the purpose of this Corporation.
3. To do everything necessary, proper or convenient for the accomplishment of any of the purposes herein set forth, and to do every other act incidental thereto which is not forbidden by the laws of the State of Florida.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that the Corporation is authorized to have outstanding at any one time is 300 shares having no par value per share. Such shares shall be of a single class of common stock.

ARTICLE IV. DURATION

The Corporation shall have perpetual existence.

ARTICLE V. ADDRESS AND AGENT

The street address of the principal and initial registered office of the Corporation is: P.O. Box 14-4255, Coral Gables, FL 33114-4255, and the name of this initial registered agent is James N. Stanley. Service may be accepted by the Registered Agent at: 351 N.W. LeJeune Rd., Suite 201, Miami, FL 33019. The Board of Directors may from time to time move the office to

any other address in the State of Florida and change the registered agent.

ARTICLE VI. DIRECTORS

The Corporation shall be managed by a Board of Directors of at least one (1) Director. The Directors shall be elected by the shareholders of the Corporation. The name and street address of each of each person who is to serve as a member of the initial Board of Director is as follows:

NAME	ADDRESS
James N. Stanley	P.O. Box 14-4255 Coral Gables, FL 33114-4255

ARTICLE VII. SUBSCRIBERS

The names and addresses of the subscribers, who are the incorporators of this Corporation are as follows:

NAME	ADDRESS
James N. Stanley	P.O. Box 14-4255 Coral Gables, FL 33114-4255

ARTICLE VIII. RESTRAINT ON ALIENATION

The Corporation has the right of first refusal on any and all sales and transfers of stock by shareholders.

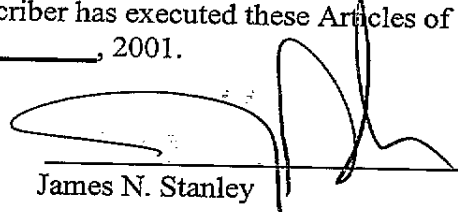
ARTICLE IX. AMENDMENT

These Articles of Incorporation may be amended in the manner provided by law.

ARTICLE X. SPECIAL PROVISIONS

The officers and directors of the corporation are fully indemnified for acts performed within the scope of their duties to the Corporation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this the 29th day of October, 2001.

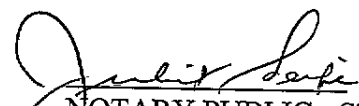

James N. Stanley

STATE OF FLORIDA }
COUNTY OF DADE }

BEFORE ME, the undersigned authority, personally appeared James N. Stanley who after being duly sworn, acknowledged to and before me that he executed said instrument for the purposes therein expressed.

WITNESS my hand and official seal, this 29th day of October, 2001
in the aforesaid County and State.

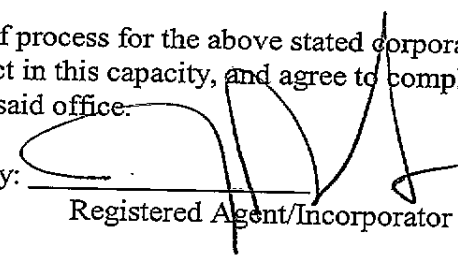



NOTARY PUBLIC - STATE OF FLORIDA
Julieta C. Seife
Commission # CG 878172
Expires Nov. 26, 2003
Bonded Thru
Atlantic Bonding Co., Inc.

My Commission Expires:

ACKNOWLEDGMENT OF REGISTERED AGENT/INCORPORATOR

Having been named to accept service of process for the above stated corporation, at place designated in the Articles, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

By: 
Registered Agent/Incorporator