

Sumstate Research
Requestor's Name

PO20000064297
Address

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Corporate Recovery Source
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in

☐ Pick up time _____

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☒ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

000005727370--8
-06/10/02--01007--001
*****87.50 *****87.50



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 10, 2002

SUNSTATE RESEARCH
WALK-IN

SUBJECT: CORPORATE RECOVERY SOURCES, INC.
Ref. Number: W02000016783

*Corrected -
Please have
dated 06/10/02*

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

You must list at least one incorporator with a complete business street address.

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) 245-6930.

Donna Graves
Document Specialist
New Filing Section

Letter Number: 802A00038018

RECEIVED
02 JUN 10 PM 3:03
DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

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

FILED
02 JUN 11 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Corporate Recovery Sources, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2601 So. Bayshore Dr., Suite 1900
Coconut Grove, FL 33133

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Consulting

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

James S. Feltman
President/Director
2601 So. Bayshore Dr., Suite 1900
Coconut Grove, FL 33133

ARTICLE VI REGISTERED AGENT

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

Allison R. Day, Esq.
Genovese Joblove & Battista, P.A.
100 SE Second St., 36th Floor
Miami, FL 33131

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SAME AS REGISTERED AGENT

Allison R. Day, Esq.
100 SE Second St. 36th Floor
Miami, FL 33131

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

06/06/02

Signature/Incorporator

Date

06/06/02