

PS000028635

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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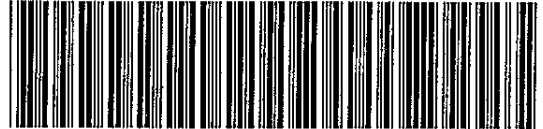
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TRANSMITTAL LETTER

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

SUBJECT: PROFESSIONAL RECOVERY SOLUTIONS, 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:

JASON BUELOW

Name (Printed or typed)

5949 TOPHER TRAIL

Address

MULBERRY, FL 33860

City, State & Zip

(863) 513-2902

Daytime Telephone number

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

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:

PROFESSIONAL RECOVERY SOLUTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5949 TOPHER TRAIL
MULBERRY, FL 33860

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS ACTIVITIES RELATIVE
TO DEBTOR COLLECTIONS

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

JASON BUELOW, PRESIDENT
5949 TOPHER TRAIL
MULBERRY, FL 33860

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

JASON BUELOW
5949 TOPHER TRAIL
MULBERRY, FL 33860

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JASON BUELOW
5949 TOPHER TRAIL
MULBERRY, FL 33860

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

x Jason Buelow
Signature/Registered Agent

2/12/05
Date

x Jason Buelow
Signature/Incorporator

2/12/05
Date