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(Re	equestor's Name)	_
(Ad	ldress)	
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DECRETARY OF STATISHED AND STATISH OF STATISHED AND S

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

	·
Predator Recovery Inc	
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
•	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
• .	Dissolution / Withdrawal
	/Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
•	Corp Record Search
	Officer Search
	Fictitious Search
	Fictitious Owner Search
Signature	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
<u>ust</u> 2/6 //:00	UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

क कार्य । वे क्रिक्ट्यम्बर्क्स रहे बरावर राज वे । जा जाकरहार राज एक पाल पाल राजा कर्मुस्ट्राम हुक्यमञ्जा करेरा स्थान कर क्रिक्ट है । जा अस्य है के प्राप्त कर के प्राप्त कर है के प्राप्त है ।

ARTICLES OF INCORPORATION In a resulting a point Chapter 607 and Jon Chapter 621. E.S. (Drafit)	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME The name of the corporation shall be:	
The name of the corporation shall be:	
Predator Recovery Inc	
ARTICLE I NAME The name of the corporation shall be: Predutor Recovery Inc ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Corol Springs, FL 333087	
A DOTAL TO LIVE DELINDAGE	
The purpose for which the corporation is organized is: Transacting any and all	
The purpose for which the corporation is organized is: Transacting any and all low ful business permited underthe hours of the united states	
ARTICLE IV SHARES	
The number of shares of stock is:	
100 shares \$1.00 per value	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	
The name(s), address(es) and title(s): The name(s), address(es) and title(s):	
The name(s), address(es) and title(s): Tames T Spewmen II Pres, VP, Sec, Tres	
·	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
James TSpeuman III	
4613 university pr #372 cord springs, FL 33067	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Janes T Spewmon III	
4613 University pr # 372	
Con Spring FL 33067	**
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in a certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	thi
2-3-06	
Signature/Registered Agent Date	
Signature/Incorporator Date	