

PO6000115695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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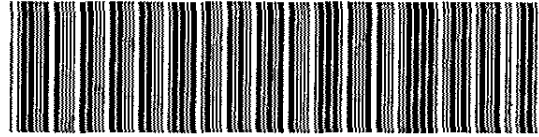
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C.F. 9-7

## COVER LETTER

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

SUBJECT: FINANCIAL ASSESSMENT & 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: William P. Myers  
Name (Printed or typed)

P. O. Box 273196

Address

Tampa, FL 33688-3196

City, State & Zip

(813) 963-7139

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: FINANCIAL ASSESSMENT & RECOVERY, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

3340 Crenshaw Lake Rd.  
Lutz, FL. 33548

mailling  
P. O. Box 273196  
Tampa, FL 33688-3196

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Loan Recovery

**ARTICLE IV SHARES**

The number of shares of stock is: 200

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

William Myers - Pres./Sec.  
Martha Myers - V.P./Treas.

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**ARTICLE VI REGISTERED AGENT**

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

William Myers  
3340 Crenshaw Lake Road  
Lutz, FL 33548

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

William Myers  
P. O. Box 273196  
Tampa, FL 33688-3196

\*\*\*\*\*

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

W. Myers

Signature/Registered Agent

9/5/06

Date

W. Myers

Signature/Incorporator

9/5/06

Date