

PO7000106827

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

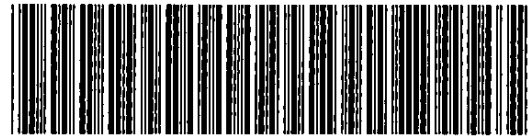
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400109691414

09/24/07--01009--012 **78.75

FILED

07 SEP 24 PM 1:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

KS

9/26/07

COVER LETTER

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

SUBJECT: Recovery Solutions of South Florida, 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: Julie Crocco

Name (Printed or typed)

1975 E Sunrise Blvd, Suite 100

Address

Ft Lauderdale, FL 33304

City, State & Zip

954-627-6157

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:

Recovery Solutions of South Florida, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

200 NW 17th Ct, Ft Lauderdale, FL 33311

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A Sober Living Community

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Julie Crocco, CEO
1975 E Sunrise Blvd, Suite 100
Ft Lauderdale, FL 33304

ARTICLE VI REGISTERED AGENT

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

Julie Crocco
1975 E Sunrise Blvd, Suite 100
Ft Lauderdale, FL 33304

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Julie Crocco
1975 E Sunrise Blvd, Suite 100
Ft Lauderdale, FL 33304

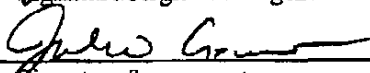
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

9-18-07

Date



Signature/Incorporator

9-18-07

Date

FILED

07 SEP 24 PM 1:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA