

P07000111930

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

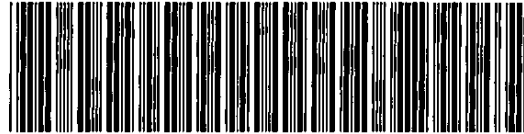
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300109956593

09/28/07--01026--003 **78.75

FILED

2007 OCT 10 P 2:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. WHITE OCT 11 2007

COVER LETTER

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

SUBJECT: GOVERNMENT RECOVERY SERVICE GROUP, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: JOHN H. RUIZ
Name (Printed or typed)

5040 NW 7 ST., SUITE 920
Address

MIAMI, FL, 33126
City, State & Zip

305-649-0020
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 28, 2007

JOHN H. RUIZ
5040 NW 7 ST
SUITE 920
MIAMI, FL 33126

SUBJECT: GOVERNMENT RECOVERY SERVICE GROUP, INC.
Ref. Number: W07000048280

We have received your document for GOVERNMENT RECOVERY SERVICE GROUP, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears the filing submitted has a typographical error in the entity name. Please verify this name and all other information contained in the filing and resubmit it for processing.

Do you mean GOVERNMENT?

Please return the corrected 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) 245-6933.

Dale White
Document Specialist
New Filing Section

Letter Number: 407A00057096

ARTICLES OF INCORPORATION

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

FILED

2007 OCT 10 P 2: 05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

RECOVERY SERVICE GROUP, INC.,
GOVERNMENT

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5040 NW 7 ST., PENTHOUSE 1,
MIAMI, FL 33126

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JOHN H. RUIZ, DIRECTOR
5040 NW 7 ST., PENTHOUSE 1
MIAMI, FL 33126

ARTICLE VI REGISTERED AGENT

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

JOHN H. RUIZ, PA
5040 NW 7 ST., PENTHOUSE 1
MIAMI, FL 33126

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JOHN H. RUIZ
5040 NW 7 ST., PENTHOUSE 1
MIAMI, FL 33126

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

Signature/Incorporator

9/25/07

Date

9/25/07

Date