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(Requestor's Name) (Address) (Address)	300137159633
(City/State/Zip/Phone #)	10./27/0801038019 **87.50
Certified Copies Certificates of Status	FILED 2009 001 21 P D: 41 SECRETARY OF STATE ANLLAHASSEE, FLORID.
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COVER LETTER

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

SUBJECT: Worldwide Asset Recovery Service, Inc. (PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)

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	✓ \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
,	Status
ADDITIONAL CO	DPY REQUIRED

FROM: Sylvia Sharps

Name (Printed or typed)

1009 Green Pine Blvd, F3

Address

West Palm Beach, FI 33409

City, State & Zip

561-876-5553

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:

Worldwide Asset Recovery Service, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 1009 Green Pine Blvd, F3 West Palm Beach, Fl 33409

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to conduct a legal business in the recovery of assets worldwide.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): 1009 Green Pine Blvd, F3 West Palm Beach, FI 33409 West Palm Beach, FI33409 L. T. Johnson, Vice President 1009 Green Pine Blvd, F3 West Palm Beach, FI 33409

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: Sylvia Sharps 1009 Green Pine Blvd, F3 West Palm Beach, FI 33409

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Sylvia Sharps 1009 Green Pine Blvd, F3 West Palm Beach, FI 33409

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 / INCOR PORATOR

10.23.08 Date

FILED

2000 OCT 27 P 12:47

SECRETARY OF STATE ALLAHASSEE, FLORIDO

Date