Division of Corporations Public Access System

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Tc:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850) 222-1092

Fax Number

: (850)878-5368

FLORIDA PROFIT/NON PROFIT CORPORATION

Colina Recovery, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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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:

Colina Recovery, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is: 104 S. Main Street, Greenville, SC 29601

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real properly holding company

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

James R. Gordon - President, Treasurer & Director

William P. Crawford, Jr. - Vice President, Secretary & Director

ARTICLE VI REGISTERED AGENT

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

CT Corporation System 1200 South Pine Island Road Plantation, FL 33324

ARTICLE VII __ INCORPORATOR

The name and address of the Incorporator is: Andrea Stegall, Carolina First Bank 104 S. Main Street Greenville, SC 29601

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 ugent and agree to act in this capacity

DALE W. MORRIS

ASSISTANT VICE PRESIDENT

Signature/Incorporator

3-13-09

Date

5-13-09

Date