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2010 APR -5 PM 5:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** CORE RECOVERY 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 checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** Law Office of Daria L. Pratcher, P.C.  
Name (Printed or typed)

136 Broadway, Suite 101  
Address

Buffalo, New York 14203  
City, State & Zip

716-541-8574  
Daytime Telephone number

corerecoverygroup@gmail.com  
E-mail address: (to be used for future annual report notification)

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

**ARTICLES OF INCORPORATION  
OF  
CORE RECOVERY GROUP, INC.**

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In compliance with Chapter 607 of the State of Florida Statutes

The undersigned, for the purpose of forming a corporation pursuant to Chapter 607 of the Statutes of the State of Florida, does hereby certify and set forth:

FIRST: The name of the corporation shall be: **Core Recovery Group, Inc.**

SECOND: The principal street address and mailing address shall be:  
17401 So. 112<sup>th</sup> Court, Summerfield, Florida 34491.

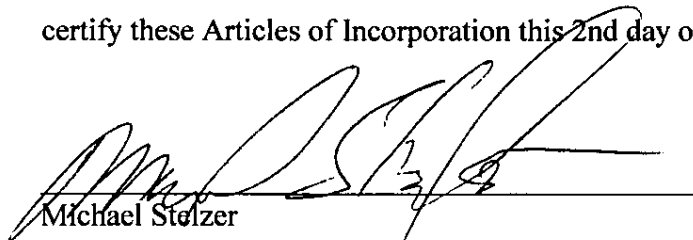
THIRD: The purpose for which the corporation is organized is: to manage the business and regulate the affairs of the corporation and to engage in any lawful act or activity for which a corporation may be organized under the Florida Statutes for Profit Corporations, provided, however, that it is not formed to engage any act or activity requiring the consent or approval of any state official, department, board, agency or other body without such consent or approval.

FOURTH: The aggregate number of shares which the corporation shall have authority to issue is Two Hundred (200) shares that shall consist of one class, and such shares are without par value.


FIFTH: The name and street address of the registered agent of the corporation is: Michael Stelzer, with offices located at 17401 So. 112<sup>th</sup> Court, Summerfield, Florida 34491.

SIXTH: The name and street address of the incorporator is:  
Michael Stelzer, with offices located at 17401 So. 112<sup>th</sup> Court, Summerfield, Florida 34491.

**IN WITNESS WHEREOF**, the undersigned incorporator has executed, signed and certify these Articles of Incorporation this 2nd day of April, 2010.

  
Michael Stelzer  
Incorporator

Have 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.

 4/2/10  
Michael Stelzer  
Registered Agent Date

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