P12000003153

(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



200215476232

01/11/12--01006--006 **70.00

RECEIVED
12 JAN 11 AM JO: 42
12 JAN 11 AM JO: 42
DEPARTMENT OF STATE OF STA

FILES

12 JAN II ANIO: 57

EUNETANY OF STATE

CG 1/11/12

COVER LETTER

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

SUBJECT: PROFESSIONAL LOCATORS ASSOCIATION, INC.

Enclosed are an output \$70.00 Filing Fe	S78.75 e Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED	
FROM:	HARRY B. CARSON Name	(Printed or typed)		
Address Tallahagaa FI 32308-5423				
City, State & Zip				
-	Daytime Telephone number carsonpa@comcast.net 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
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I	NAME	TORS ASSOCIATION, INC	
The name of the	corporation shall be: PROFESSIONAL LOCAL	TOWN WOODCINITON, INC	O
ARTICLE II	PRINCIPAL OFFICE		12 JAN 1 1 AM 10:57
	Principal street address	Mailing addr	ress, if different is:
	1618 Robinhood Lane Clearwater, FL 33764	<u></u>	SECRETARY OF STATE
	CIERIWALEI, III 35/04		- TELEVIEW OF THE BUILDING
ADMICE DE	DIMPOSE		
The purpose for	which the corporation is organized is:		
. • •	the return of unclaimed property	v to it's rightful ou	wners
or their le	egal heirs in a manner that is p	roficient and cost ef	ffective.
			·
ARTICLE IV	SHARES	•	
The number of sh	nares of stock is: 100		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTO	RS	
	Title: Pat Traylor-President		
Address:	1618 Robinhood Lane		
	Clearwater, FL 33764		
	Harry B. Carson-Vice-Presid	 ent	
Name and	Title:	Name and Title:	
Address:	Ste 106	Address:	
	Tallahassee, FL 32308-5433		
Name and Address:	Title:	Name and Title:	
Audress:		Address:	
		<u> </u>	
ARTICLE VI	REGISTERED AGENT		
· · · · · · · · · · · · · · · · · · ·	lorida street address (P.O. Box NOT acceptable) o	of the registered agent is:	
Name:	Harry B. Carson	_	
Address:	1815 Miccosukee Commons Dr.	_Ste 106	
	Tallahasee, FL 32308-5433	-	
ARTICLE VII	INCORPORATOR		
	ddress of the Incorporator is:		•
Name:	Harry B. Carson		
Address:	1815 Miccosukee Commons Dr.	• Ste 106	
	<u>Tallahassee, FL 32308-5433</u>	. .	
	med as registered agent to accept service of proce		
	am familiar with and accept the appointment as re	gistered agent and agree to act i	n this capacity
11. 1	Cura		A
Hand	·Chron		01-11-12 Date
Harry B. C	Carson Required Signature/Registered Agent		Date
	cument and affirm that the facts stated herein ar		
document to the	Department of State constitutes a third degree felor	ny as provided for in s.817.155, i	F.S.
11	a h Ci au		01-11-17
	Required Signature/Incorporator		01-11-12 Date
Harry B. Ca	erson Required digital discrincorporator		Duto

Harry B. Carson