

PD500037284

TRANSMITTAL LETTER

FILED
\$5.00 - 9 AM 9-40
TALLAHASSEE, FLORIDA

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

ENCLOSURE 1 4184 7 850
405/493/205-401144-0000
*****70.00 *****70.00

SUBJECT: Professional Analysis and Recovery, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of Incorporation and a check for :

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: John Little
Name (printed or typed)

P.O. Box 1138
Address

Indian Rocks Bch, FL 34635
City, State & Zip

813 - 392 - 0085
Daytime Telephone number

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

D. BROWN MAY 11 1995

FILED
95 MAY -9 AM 9:40
CLERK OF THE CIRCUIT COURT
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Professional Analysis and Recovery, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

19531 Gulf Blvd Ste 612 PO Box 1138
Indian Shores, FL 34635 Indian Rocks Bch, FL 34635

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

5000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

John Litts
19531 Gulf Blvd #612
Indian Shores, FL 34635

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the Incorporator(s) to these Articles of Incorporation is(are):

John Lillis, President
19531 Gulf Blvd Ste 612
Indian Shores, FL 34635

The undersigned Incorporator(s) has(have) executed these Articles of Incorporation this

April day of 12, 1995.

John Lillis
Signature

Signature

Signature

**Articles of Incorporation
Filing Fee - \$35**

FILED
95 MAY -9 AM 9:40
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Professional Analysis
and Recovery, Inc.

2. The name and address of the registered agent and office is:

John L. Hs
(Name)

19531 GULF Blvd #612
(P.O. Box or Mail Drop Box **NOT** acceptable)

Indian Shores, FL 34635
(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

John L. Hs
(Signature)

April 12 1995
(Date)

P95000037287

Aug. 26 1995

Division of corporations:

Enclosed is articles of dissolution for Professional analysis & Recovery,
and a check for \$35.00 plus \$8.75 for a certificate of status.

100001584141
-03/14/35--01006--004
*****43.75 *****43.75

Thank you


PROFESSIONAL ANALYSIS & RECOVERY
19531 GULF BLVD Ste 612
INDIAN SHORES, FL 34635

84 OCT - 6 1995

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 OCT - 5 PM 1:23



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

September 18, 1995

Professional Analysis & Recovery
19531 Gulf Blvd.
Suite 612
Indian Shores, FL 34635

SUBJECT: PROFESSIONAL ANALYSIS AND RECOVERY, INC.
Ref. Number: P95000037287

We have received your document for PROFESSIONAL ANALYSIS AND RECOVERY, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

Please return 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 (904) 487-6908.

Steven Harris
Corporate Specialist

Letter Number: 095A00042840

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 OCT -5 PM 1:23



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

September 28, 1995

Professional Analysis and Recovery, Inc.
19531 Gulf Blvd.
Suite 612
Indian Shores, FL 34635

SUBJECT: PROFESSIONAL ANALYSIS AND RECOVERY, INC.
Ref. Number: P95000037287

We have received your document for PROFESSIONAL ANALYSIS AND RECOVERY, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

Please return 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 (904) 487-6908.

Steven Harris
Corporate Specialist

Letter Number: 695A00044422

FILED
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DIVISION OF CORPORATIONS
95 OCT -5 PM 1:23

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: THE NAME OF THE CORPORATION IS: Professional Analysis And Recovery Inc.

SECOND: THE DATE DISSOLUTION WAS AUTHORIZED: Aug 26 1995

THIRD: ADOPTION OF DISSOLUTION (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by vote of the shareholders through voting groups.

☐ The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

" The number of votes cast for dissolution was sufficient for approval by John Litts The only share holder.

Signed This 26 Day of Aug 1995
Signature 

(By the chairman or Vice Chairman of the board, President, or other officer)

John Litts

Typed or printed name

President

title

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DIVISION OF CORPORATIONS
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