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TRANSMITTAL LETTER

FILED

95 MAY 12 PM 3:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

100001486161
-05/12/95--01082--006
****122.50 ****122.50

SUBJECT: Metropolitan Retail 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: Metropolitan Retail Recovery, INC.
Name (printed or typed)

9999 N.E. 2nd Ave
Address

Miami Shores, FL 33138
City, State & Zip

(305) 751-1914
Daytime Telephone number

PAK 5-12

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

ARTICLES OF INCORPORATION

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Metropolitan Retail Recovery, INC.

ARTICLE II PRINCIPAL OFFICE

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

9999 NE 2ND AVE Miami Shores FL 33138

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

FRANK RODRIGUEZ
12 NE 9TH AVE
Deerfield Bch, FL 33441

ARTICLE V INCORPORATOR(S)

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

FRANK RODRIGUEZ

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

15 day of March, 1995.

Frank Rodriguez
Signature

Signature

Signature

Articles of Incorporation
Filing Fee - \$35

**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: Metropolitan Retail Recovery, INC.

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

FRANK Rodriguez
(Name)

12 NE 9th AVE
(P.O. Box or Mail Drop Box NOT acceptable)

Deerfield Bch, FL 33441
(City/State/Zip)

SECRET
TALLAHASSEE, FLORIDA

95 MAY 12 PM 3:06

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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.

Frank Rodriguez
(Signature)

3-15-95
(Date)