## 96-12-12-619

Department of State Division of Corporations P. O. Box 6327 Tallehusses, Ft. (12014

> 20000190992 -07/24/96--01089--010 \*\*\*\*131.25

	(Proposed corpored	te name - must include suffix)
Enclosed is an originator:    #70.00   Filing Fee	af and one (1) c \$78.75 Filing Fee & Certificate	\$122.50 \$131.25 Filing Fee & Certified Copy & Certificate  Additional Copy Required
FROM:		Little, Jr.  (printed or typed)
	Name	(printed or typed) 显著 2
	15506 Fe	entress Court
	Tampa,	Address FL 33647
	Cit	ty, State & Zip
	(813) 97	
	JUL 26	1996 353

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

## 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.

> ARTICLEI NAME

The name of the corporation shall be:

Profit Recovery, Inc.

ARTICLE II PRINCIPAL OFFICE

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

15506 Fentress Court Tampa, FL 33647

ARTICLE III SHARES

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

INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

Willie Little, Jr. 15506 Fentress Court Tampa, FL 33647

## ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Willie Little, Jr. President 15506 Fontress Court Tampa, FL 33647

The undersign	ned incorporator(s) has(h	ave) executed these	Articles of I	incorporation	this
	of July 23	, 19 <u>_<b>96</b></u>	·	•	`.·
(An additional	article must be added if	an effective date is	requested.)		
					•
	Wille of	ittle Jr.		<u>.</u>	
		Signature			
		<u> </u>			
		Signature	•	*.	
		Signature			

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

THE HAIDS AD	d address of the registered agent and office is:
	Willie Little, Jr.
	(NAME) 15506 Fentress Court
	(P.O. Box or Mail Drop Box NOT ACCEPTABLE)
	Tampa, FL 33647
	(CITY/STATE/ZIP)
•	
and agree	med as registered agent and to accept service of process for the above state e place designated in this certificate, I hereby accept the appointment as registere to act in this capacity. I further agree to comply with the provisions of all statut per and complete performance of my duties, and I am familiar with and accept the position as registered agent.

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314