

P96000/00955

Charter Number Only

12-12-96  
Requestor's Name PBR  
Address  
City State ZIP Phone

VALIDATION ONLY

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96 DEC 13 PM 3:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

50000202875-4  
-12/13/96-01063-015  
\*\*\*\*122.50 \*\*\*\*122.50

CORPORATION(S) NAME

Milliken Asset Recovery systems  
Inc.

☒ Profit  
☐ NonProfit  
☐ Amendment  
☐ Merger  
☐ Foreign  
☐ Dissolution  
☐ Mark  
☐ Limited Partnership  
☐ Annual Report  
☐ Other  
☐ Reinstatement  
☐ Reservation  
☐ Change of Registered Agent  
☒ Certified Copy  
☐ Photo Copies  
☐ Certificate Under Seal  
☐ Call When Ready  
☐ Call If Problem  
☐ After 4:30  
☒ Walk In  
☐ Will Wait  
☒ Pick Up  
☐ Mail Out

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DIVISION OF CORPORATION

Empire Toll Free: 1-800-432-3028

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CR2E031 (R8-85)

AL DEC 13 1996  
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## ARTICALS OF INCORPORATION

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SECRETARY OF STATE  
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: MILLIKEN ASSET RECOVERY SYSTEMS INC.

### ARTICLE II PRINCIPAL OFFICE

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

179 Rivera Avenue  
Royal Palm Beach, FL 33411

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 5,000

### ARTICLE IV INTIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the intial registered agent is:

Robert S. Milliken  
179 Rivera Avenue  
Royal Palm Beach, FL 33411

**ARTICLE V INCORPORATOR(S)**

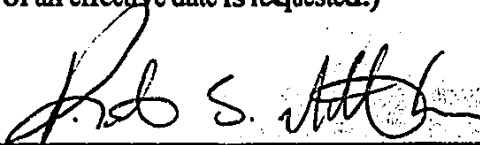
**See instructions for officers/ directors**

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

Robert S. Milliken  
179 Rivera Avenue  
Royal Palm Beach, FL 33411

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this  
12<sup>th</sup> day of DECEMBER, 19 96.

(An additional article must be added of an effective date is requested.)



Robert S. Milliken Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notorization 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**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

1. The name of the corporation is MILLIKEN ASSET RECOVERY  
SYSTEMS INC

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

ROBERT S. MILLIKEN  
(Name)

179 Rivera Avenue  
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

Royal Palm Beach, FL. 33411  
(CITY/STATE/ZIP)

*Having been named 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 obligation of my position as registered agent.*

  
ROBERT S. MILLIKEN (SIGNATURE)

12/12/96  
(DATE)

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