

P97000017186

DIGITAL RECOVERY SYSTEMS, INC.
P.O. BOX 821082
SOUTH FLORIDA, FL 33082

City/State/Zip

Phone #

FILED

97 FEB 24 PM 2:05

SECTION 1
TALLAHASSEE, FLORIDA

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #) 888882849250--0
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3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☐ Walk in

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☐ Will wait

☐ Photocopy

☐ Certificate of Status

W97-861
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609

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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2:24:41



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

January 14, 1997

SLOANE S. MORGAN, ESQUIRE
POST OFFICE BOX 821082
SOUTH FLORIDA, FL 33082

SUBJECT: DIGITAL RECOVERY SYSTEMS, INC.
Ref. Number: W9700000861

We have received your document for DIGITAL RECOVERY SYSTEMS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent. *

The designation of the registered agent must be at a Florida street address.

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) 487-6927.

Kathy Hyman
Document Specialist

Letter Number: 197A00001797

* Corrected! Thank you

RELINQUISHMENT OF CORPORATE NAME FOR
"DIGITAL RECOVERY SYSTEMS, INC."

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97 FEB 24 PM 2:07
TALLAHASSEE, FLORIDA

COMES NOW, the former directors of **Digital Recovery Systems, Inc.**,
ADRIANA SMITH and TODD SMITH, and hereby relinquish the name of **Digital Recovery Systems, Inc.** Furthermore, the directors relinquish all use of said name as they will not be doing any business in the State of Florida as **Digital Recovery Systems, Inc.**

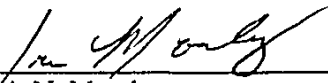
THEREFORE, said name shall now be available for use to anyone who wishes to incorporate their business in Florida under the name of **Digital Recovery Systems, Inc.**, and are free to do business under said name.


TODD SMITH


ADRIANA SMITH

State of Florida
County of Broward

I hereby Certify on this day, before me, a Notary Public authorized in the state and county named above, to take acknowledgments, personally appeared TODD SMITH and ADRIANA SMITH, whom are personally known to me, who executed the forgoing on this 28th day of December, 1996.


Iris N. Morales
NOTARY PUBLIC

My Commission Expires:



Official Seal
IRIS N. MORALES
Notary Public, State of Florida
My Comm. Expires June 18, 1999
No. 472287
Bonded Thru Notary Public Under

**ARTICLES OF INCORPORATION
OF
DIGITAL RECOVERY SYSTEMS, INC.**

97 FEB 24 PM 2:07
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a for profit corporation under the provisions of Chapter 607 of the Florida Statutes, adopts the following Articles of Incorporation:

**ARTICLE I
NAME AND MAILING ADDRESS**

The name of the Corporation is DIGITAL RECOVERY SYSTEMS, INC., the mailing address for the corporation is Post Office Box 821082, South Florida, Florida 33082.

**ARTICLE II
TERM OF EXISTENCE**

The existence of the corporation shall begin upon the filing of the Articles by the Secretary of State and shall exist perpetually thereafter unless sooner dissolved according to law.

**ARTICLE III
PURPOSE**

The general purpose for which the corporation is organized to render legal services and for any other purpose which corporations may be incorporated under Chapter 607 of the Florida Statutes and any amendments or successor statutes thereto.

**ARTICLE IV
AUTHORIZED SHARES**

The aggregate number of shares this corporation shall be authorized to issue shall be 100 shares of Common Stock at a par value of \$1.00. The shares of the corporation shall be issued for such consideration as may be determined by the Board of Directors but not less than par value.

**ARTICLE V
REGISTERED OFFICE**

The street address of the initial registered office in the State of Florida shall be

833 SW 179 Ave
Pembroke Pines, FL
33029

The name of the initial registered agent at the above address shall be Sloane S. Morgan, Esquire. The Board of Directors may from time to time change the registered office or change the registered agent to any other qualified agent.

**ARTICLE VI
NUMBER OF DIRECTORS**

This corporation shall have 1 Director initially. The number of directors may be increased or diminished from time to time by the by-laws but shall never be less than 1.

The name and address of the initial directors are:

Sloane S. Morgan, Esquire
Post Office Box 821082
South Florida, Florida 33082

**ARTICLE VII
INCORPORATOR**

The name and the address of the incorporator is:

Sloane S. Morgan, Esquire
Post Office Box 821082
South Florida, Florida 33082

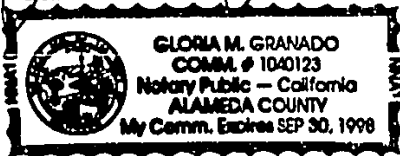
Dated this 5th day of November, 1996.

Sloane S. Morgan
Incorporator

STATE OF CALIFORNIA
COUNTY OF ALAMEDA

I hereby Certify on this day, before me a Notary Public authorized in the state and county named above, to take acknowledgments, personally appeared SLOANE SMITH MORGAN, personally known to me, who executed the foregoing Articles of Incorporation for the purposes therein designated.

Gloria M. Granado
Notary Public
Comm. No:
Seal:



CONSENT OF REGISTERED AGENT

Having been Registered Agent for this Corporation at the Registered Office designated in the foregoing Articles of Incorporation, the undersigned accepts such designation.

Dated this 5th day of November, 1996.

Sloan S. Morgan

Registered Agent

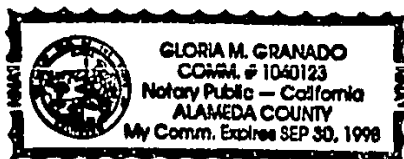
STATE OF CALIFORNIA
COUNTY OF ALAMEDA

I hereby Certify on this day, before me a Notary Public authorized in the state and county named above, to take acknowledgments, personally appeared SLOANE SMITH MORGAN, personally known to me, who executed the foregoing Articles of Incorporation for the purposes therein designated.

Gloria M. Granado
Notary Public

Comm. No:

Seal:



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA