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(SAMPLE LETTER OF TRANSMITTAL)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 MAY -9 AM 7:59

DATE

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

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****122.50 ****122.50

Re: Golden Recovery, Inc.
(Name of Corporation)

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

Ronnie L. Shundat
(Individual's Name)

Golden Recovery, Inc.
(Name of Corporation)

MAILING ADDRESS OF CORPORATION		
4910 NW 27 th COURT		
GAINESVILLE, FL 32606		
PHONE		
(352)	377-5719	
Area Code	Number	Ext.

ARTICLES OF INCORPORATION

of

Golden Recovery, Inc

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

ARTICLE I - CORPORATE NAME

The name of the corporation is:

Golden Recovery, Inc.

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ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 500 shares of common stock, par value \$ 1.00 per share.

ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS	4910 NW 27 COURT		
CITY	GAINESVILLE	FLORIDA	ZIP 32606

Mailing address, if different

STREET ADDRESS	SAME		
CITY	FLORIDA	ZIP	

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME	RONNIE L. GRUNDSET		
ADDRESS	4910 NW 27 COURT		
CITY	GAINESVILLE	FLORIDA	ZIP 32606

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have three (3) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	RONNIE L. GRUNDSET		
ADDRESS	4910 NW 27 th COURT		
CITY	GAINESVILLE	STATE	FL ZIP 32606
NAME	Jeffrey Summerlin		
ADDRESS	3145 NW 46 th Ave		
CITY	GAINESVILLE	STATE	FL ZIP 32605
NAME	RICHARD Kowalski		
ADDRESS	3145 NW 46 th Ave		
CITY	GAINESVILLE	STATE	FL ZIP 32605

ARTICLE VIII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	RONNIE L. Grundset		
ADDRESS	4910 NW 27 th COURT		
CITY	GAINESVILLE	STATE	FL ZIP 32606
NAME	Jeffrey Summerlin		
ADDRESS	3145 NW 46 th Ave		
CITY	GAINESVILLE	STATE	FL ZIP 32605
NAME	Richard Kowalski		
ADDRESS	3145 NW 46 th Ave		
CITY	GAINESVILLE	STATE	FL ZIP 32605

The undersigned incorporator(s) have executed these Articles of Incorporation this 6th day of MAY, 1997.

Ronnie L Grundset (Signature)

Jeff Summerlin (Signature)

Richard Kowalski (Signature)

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/ REGISTERED OFFICE

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Golden Recovery, INC.
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 4910 NW 27 COURT
GAINESVILLE, FL 32606

has named RONNIE L. GRUNDSET

located at the aforesaid address, as its registered agent to accept service of process within this state.

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.

Ronnie L. Grundset
(Signature)

5/6/97
(Date)