# P99000011968

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

SUBJECT: RI	ECOVERY IN MOTION, I	NC.				
	(Proposed corpor	ate name - must include su	ffix)			_
		geder in een in een	400002 -02/0 ****	4/99010	36 <b>4</b> 074001 *****78.	- <b>7</b> 75
Enclosed is an origina	l 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	S131.2 Filing Fe Certified & Certifi	e, Copy		
		ADDITIONAL CO	PY REQUI	RED		
FROM: _	FROM: Reocovery In Motion  Name (Printed or typed)				}	
* 4763-C Orleans CT Address				FEB -4 CAHASSE	FILED	
	West Palm Beach, FL 33415  City, State & Zip			OF STATE E, FLORIDA	:	
1-888-372-0109  Daytime Telephone number						
						-

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

m 2/8/99

### ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

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### ARTICLE I NAME

The name of the corporation shall be:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

RECOVERY IN MOTION, INC.

### ARTICLE II PRINCIPAL OFFICE

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

4763-C Orleans CT. West Palm Beach, FL 33415

## ARTICLE III SHARES

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

One (1)

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Cedric Mays 4763-C Orleans CT. West Palm Beach, FL 33415

# ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Cedric Mays 4763-C Orleans CT. West Palm Beach, FL 33415

Signature/Incorporator

1- 30-99 Pata

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

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

Signature/Registered Agent

80°99

Date