

P040000 87333

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

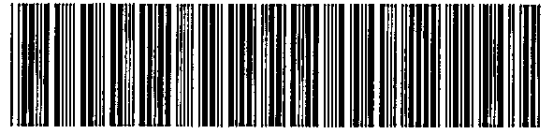
(Document Number)

Certified Copies _____

Certificates of Status _____

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DIVISION OF CLERICAL

04 JUN -4 AM 11:21

TALLAHASSEE, FLORIDA

04 JUN -4 AM 11:21

**CORPORATE
ACCESS,
INC.**

236 East 6th Avenue, Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

WALK IN

PICK UP

6/4

TS

☒ **CERTIFIED COPY**

CUS

PHOTO COPY

☒ **FILING** Arts

1.) South Florida Clinical Research Center, Inc.
(CORPORATE NAME & DOCUMENT #)

2.) _____
(CORPORATE NAME & DOCUMENT #)

3.) _____
(CORPORATE NAME & DOCUMENT #)

4.) _____
(CORPORATE NAME & DOCUMENT #)

5.) _____
(CORPORATE NAME & DOCUMENT #)

SPECIAL INSTRUCTIONS

04 JUN -4 PM 1:37
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

South Florida Clinical Research Center, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

320 S. Flamingo Rd., Ste. 354
Pembroke Pines, FL 33027

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medical Services

ARTICLE IV SHARES

The number of shares of stock is:

100,000 (no par value)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Maury Jayson, Director
320 S. Flamingo Rd., Ste. 354
Pembroke Pines, FL 33027

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

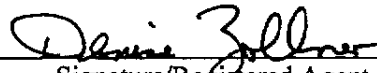
Paracorp Incorporated
236 East 6th Avenue
Tallahassee, FL 32303

ARTICLE VII INCORPORATOR

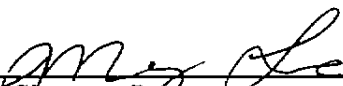
The name and address of the Incorporator is:

Mary Layne
640 Bercut Dr #A
Sacramento, CA 95814

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

By: 
Signature/Registered Agent

6/2/04
Date


Signature/Incorporator

6/2/04
Date

CA JUN-4 11:37
TALLAHASSEE, FLORIDA