

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000055915 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0381

From:

Account Name : CORPDIRECT AGENTS, INC.

Account Number: 110450000714

Phone

Fax Number

: {850}222-1173

: (850)224-1640

FLORIDA PROFIT/NON PROFIT CORPORATION

MEDICAL CORRECTIONAL SERVICES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

H060000559153

ARTICLES OF INCORPORATION

OF

MEDICAL CORRECTIONAL SERVICES, INC.

The undersigned, acting as the incorporator of a corporation under the Florida Business Corporation Act, adopts the following Articles of Incorporation for such corporation:

ARTICLE I Name of Corporation

The name of the corporation is MEDICAL CORRECTIONAL SERVICES, INC.

ARTICLE II Commencement And Duration of Corporate Existence

Corporate existence shall commence on the date the Articles are filed by the Department of State and shall exist perpetually thereafter until dissolved according to law.

ARTICLE III Corporate Purpose

This corporation is organized for the purpose of transacting any and all lawful business permitted under the laws of the United States and the State of Florida.

ARTICLE IV Capital Stock

The corporation shall have authority to issue one hundred thousand (100,000) shares of Capital Stock with a par value of \$.01 per share. The shares of the corporation are not to be divided into classes.

но6000055915 На 28

From: Tracy Spear

H060000559153

ARTICLE V Principal Office

The principal office and mailing address of the corporation is:

1061 Riverside Ave. Jacksonville, Florida 32204

ARTICLE VI Registered Office and Agent

The street address in Florida of the corporation's initial registered office and initial registered agent is:

Stoneburner Berry & Simmons, P.A. 841 Prudential Drive, Suite 1400 Jacksonville, Florida 32207

ARTICLE VII Indemnification

The corporation shall indemnify any present or future officer or director, or person exercising powers and duties of a director, to the full extent now or hereafter permitted by law.

ARTICLE VIII By-Laws

The power to adopt, alter, amend or repeal bylaws shall be vested in the board of directors and the shareholders, but the board of directors may not alter, amend or repeal any bylaws adopted by the shareholders if the shareholders provide that the bylaws shall not be altered, amended or repealed by the board of directors.

From: Tracy Spear

Thursday, March 02, 2006 10:29 AM Page: 4 of 5

H060000559153

ARTICLE IX Incorporator

The name and address of the incorporator is as follows:

Name

Address

Sidney S. Simmons, II

841 Prudential Drive, Suite 1400 Jacksonville, Florida 32207

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation at Jacksonville, Florida on the 240 day of March, 2006.

Sidney S. Simmons, II

Incomprator

H060000559153

DESIGNATION OF REGISTERED AGENT

In compliance with Section 48.091 and 607.0501, Florida Statutes, the following is submitted:

That MEDICAL CORRECTIONAL SERVICES, INC., desiring to organize under the laws of the State of Florida, with its principal place of business in Jacksonville, Florida, has named Stoneburner Berry & Simmons, P.A., located at 841 Prudential Drive, Suite 1400, Jacksonville, Florida 32207, as its agent to accept service of process within Florida.

MEDICAL CORRECTIONAL SERVICES, INC.

Sidney S. Simmons, II

Incorporator

Dated: MARCL Z. 2005

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, the undersigned hereby agrees to act in this capacity, and further agrees to comply with the provisions of all statutes relative to the proper and complete performance of my duties. In addition, the undersigned hereby acknowledges that it is familiar with, and accepts, the obligations provided for in Section 607.0505, Florida Statutes.

STONEBURNER BERRY & SIMMONS. P.A.

sy: (///ays).//www ys vice medicin+__

Dated: //mc/ 2 200

06 MAR -2 AM

SECRETARY OF STATE DIVISION OF CORPORATION