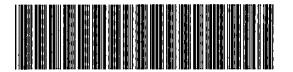


•		
(Requestor's Name)		
(Address)		
(Address)		
(Cit	y/State/Zip/Phone	e #)
	_	
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
		•
Special Instructions to I	Filing Officer	
	g •	

Office Use Only



000079877870

09/20/06--01006--005 **87.50

06 SEP 20 PN 12: 5

9/30

The Law Offices of

J. SCOTT NOONEY & ASSOCIATES

3535 Hendricks Avenue Jacksonville, FL 32207-3303 904-398-1992 telephone 904-858-9943 facsimile

J. SCOTT NOONEY DONALD D. GUTHRIE ANA ROSA LEIMBACH ASHWIN A. SHARMA

May 25, 2006

Case Managers Kristene Brown Mary Duncan Wendy Galpin Angela Hampshire Tonya Jackson Tammy McCollum

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

Re: Incorporation of Lawrence Medical Consulting, Inc

To Whom it May Concern,

Our firm has been retained to incorporate the above referenced business. Enclosed are an original and two (2) copies of the articles of incorporation and a check for the filing fee, certified copy and Certificate of Status in the amount of \$87.50. Please forward all relevant documents to Scott Nooney & Associates at the above address.

Sincerely

Michael Roberts

ARTICLES OF INCORPORATION OF Lawrence Medical Consulting, Inc.

OG SEP ZO PH 12: 57

The undersigned subscriber to these Articles of Incorporation, a natural person and competent to contract, hereby forms a corporation pursuant to the laws of the State of Florida.

ARTICLE I - NAME

The name of this corporation shall be Lawrence Medical Consulting, Inc.

ARTICLE II - NATURE OF THE BUSINESS

The purpose of this business is to provide nursing and medical expertise consulting within the State of Florida.

ARTICLE III - CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock with no par value.

ARTICLE IV - BUSINESS ADDRESS

The business' place of business shall be located at 1485 Linkside Dr., Atlantic Beach, FL 32233.

ARTICLE V - REGISTERED AGENT

The corporations registered agent shall be Jacquelyn Muth Barrett. The address of the registered agent shall be 1485 Linkside Dr., Atlantic Beach, FL 32233.

ARTICLE VI - TERM OF EXISTENCE

This corporation will exist perpetually.

ARTICLE VII - DIRECTORS

The minimum number of directors of this corporation will be 1. The initial board of directors will consist of:

Jacquelyn Barrett 1485 Linkside Dr. Atlantic Beach, FL 32233.

ARTICLE VIII - INCORPORATOR

The name and address of the incorporator is:

Jacquelyn Barrett 1485 Linkside Dr. Atlantic Beach, FL 32233.

In witness whereof, this _____ day of ___

State of Florida County of Duval

The foregoing instrument was acknowledged by me this day of <u>Tuly</u>, 2006 by: <u>Tacquelyn Bayvett</u> who is/are personally known by me or who has/have produced: Fh. Drugos Licensus identification and who did not take an oath.

Notary Public
State of Florida
My Commission Expires:

Aug. 15, 2006

dy Commission DD142431



DESIGNATION OF AND ACCEPTANCE BY REGISTERED AGENT

The following is submitted in compliance with the laws of the State of Florida. **Lawrence** Medical Consulting, Inc., a corporation organizing under the laws of the State of Florida, with its principal office located at: 1485 Linkside Dr., Atlantic Beach, FL 32233., has named Jacquelyn Muth Barrett, whose address is 1485 Linkside Dr., Atlantic Beach, FL 32233., as its Agent to accept service of process within this State.

I, Jacquelyn Muth Barrett, agree as Registered Agent to accept service of process; to keep the office open during prescribed hours; to post my name (and any other officers of said corporation authorized to accept service of process at the above designated address) in some conspicuous place in the office as required by law.

Registered Agent:

Sacquelyn Bourett

State of Florida County of Duval

ELDrivors Licenses as identification and who did take an oath.

Notary Public
State of Florida
My Commission Expires:

Hug. 15, 2006

My Commission DD142431