

PO800005920J

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

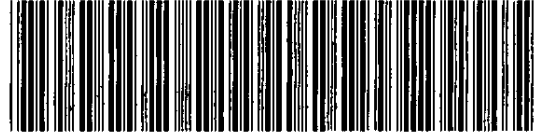
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W08-28786

Office Use Only

[Handwritten signature]
6/18



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06/03/08--01031--010 **78.75

FILED
08 JUN 18 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: 40 AND COMPANY
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for: ⁹

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: DAVID QUARTELL
Name (Printed or typed)

126 CASA GRANDE CT
Address

PAZM BEACH GARDENS, FL 33418
City, State & Zip

561 596-2710
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 10, 2008

DAVID QUARTELL
126 CASA GRANDE CT.
PALM BEACH GARDENS, FL 33418

SUBJECT: 4 Q AND COMPANY
Ref. Number: W08000028186

We have received your document for 4 Q AND COMPANY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

When the word COMPANY is preceded by the word "and" you must list an additional suffix. Such suffix as INC, INCORPORATED, CORP. or CORPORATION.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole
Regulatory Specialist II

Letter Number: 408A00035647

5/10/08 10:00 AM

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:

4 Q AND COMPANY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

7100 FAIRWAY DR # 33
PALM BEACH GARDENS, FL 33418

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HEALTH CARE MARKETING

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DAVID QUARTELL - PRES
126 CASA GRANDE CT
PALM BEACH GARDENS, FL 33418

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

DAVID QUARTELL
126 CASA GRANDE CT
PALM BEACH GARDENS, FL 33418

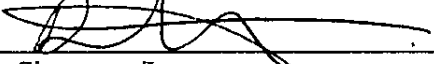
The name and address of the incorporator is:

The L. DAVID QUARTELL
126 CASA GRANDE CT
PBG, FL 33418

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



Signature/Registered Agent



Signature/Incorporator

6/4/08

Date

6/4/08

Date

FILED
08 JUN 18 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA