TRANSMITTAL LETTER

## P02000135463

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

railanassee, FL 32	314			
SUBJECT: Driscoll & Associates, Toc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
90008096829—1 -09/30/0201032013 *****78.75 ******78.75  Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	Deborah Drisco Name (	Printed or typed)  Orive ddress	02 SEP 30	TALLAHAS FILL

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

W2 28665

Tumpa, FL 33615 City, State & Zip

213 - 886 4222 Daytime Telephone number



## FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

October 3, 2002

DEBORAH DIRSCOLL 8727 PALISADES DRIVE TAMPA, FL 33615

SUBJECT: DRISCOLL & ASSOCIATES, INC.

Ref. Number: W02000028665

We have received your document for DRISCOLL & ASSOCIATES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

## Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document must state the number of shares of authorized stock.

Please return the original and one copy of 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) 245-6904.

Freida Chesser Corporate Specialist New Filings Section

Letter Number: 002A00055685

## ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) The name of the corporation shall be: Driscoll Healthcare, Inc. PRINCIPAL OFFICE The principal place of business/mailing address is: 8727 Palisades Drive Tampa, FL 33615. PURPOSE ARTICLE III The purpose for which the corporation is organized is: Healthcare Consulting ARTICLE IV SHARES The number of shares of stock is: one ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): Deborah Driscoll-Smith, President REGISTERED AGENT The name and Florida street address of the registered agent is: Deborah Driscoll-Smith 8727 Palisales Drive Jampa, Ex The name and address of the Incorporator is: Deborah Driscoll- Smith 8727 Palisades Drive 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