

NO40000008885

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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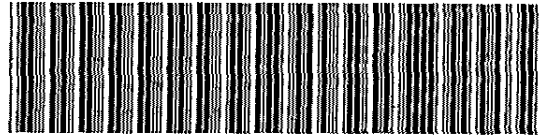
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TH 9/15/04

TRANSMITTAL LETTER

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

SUBJECT: First Step Occupational Health Services, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$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: Monique L. Buschena
Name (Printed or typed)

5030 66th ST. N. Ste. 13
Address

Pinellas Park FL 33781
City, State & Zip

727-547-1770
Daytime Telephone number

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

Article I Name

The name of the corporation shall be:
First Step Occupational Health Services, Inc.

Article II Principal Office:

The principal place of business and mailing address of this corporation shall be:
5030 78th Ave. N. Ste. 13
Pinellas Park, FL 33781

Article III Purpose:

The purpose for which the corporation is organized:
Wellness, Physicals and Occupational Health Treatment

Article IV Manner of Election:

The manner in which the directors are elected or appointed:
As stated in the by-laws.

Article V Initial Directors/Officers:

Monique Buschena	CEO/President	PO Box 56182 St. Petersburg, FL 33732
Beau Brabon	Vice President	PO Box 56182 St. Petersburg, FL 33732
Bradley Young	VP Marketing & Sales	PO Box 56182 St. Petersburg, FL 33732

Article IV Initial Registered Agent and Street Address:

Monique Buschena
5030 78th Ave. N. Ste. 13
Pinellas Park, FL 33781

Article VII Incorporator:

Monique Buschena,
5030 78th Ave. N. Ste. 13
Pinellas Park, FL 33781

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

Monique Buschena

Signature (Registered Agent)

9/13/04

Date

Monique Buschena

Signature (Incorporator)

9/13/04

Date

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TALLAHASSEE, FLORIDA