P00000139 46

TRANSMITTAL LETTER

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

SUBJECT: MED RETURN SERVICES, INC.
(Proposed corporate name - must include suffix)

600003129216--6
-02/09/00--01040--001
*****87.50 *****87.50

Enclosed is 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: JAN HOPKINS
Name (Printed or typed)

P.O. Box 651
Address

PERRY, FL 32348
City, State & Zip

850/584-8800
Daytime Telephone number

APPROVED AND FILED
00 FEB -9 AM 10:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
00 FEB -9 AM 11:03
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

(W)

2-9-00

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

APPROVED AND FILED
00 FEB -9 AM 10:53
SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

MED RETURNSERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1272 LANGFORD LANE
P.O. Box 651
PERRY, FL 32348

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

JAN HOPKINS
1272 LANGFORD LANE
PERRY, FL 32347

ARTICLE V INCORPORATOR

The **name and address** of the incorporator to these Articles of Incorporation are:

AUTUMN KOSSOVICH - SEC./TREAS
P.O. Box 1483
MAYO, FL 32066

Autumn Kossovich
Signature/Incorporator

JAN HOPKINS - PRES.
P.O. Box 651
PERRY, FL 32348

Jan Hopkins
2-9-00
Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Jan Hopkins
Signature/Registered Agent

2-9-00
Date