TRANSMITTAL LETTER

P0000039368

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

SUBJECT: W	JACK GILLIS ENTERPR	RISES, INC.		
	(PROPOSED CORPORA)	TE NAME – MUST INCL	UDE SUFFIX)	
		4	-000013205 -04/14/00 *****87,50	93946 -01061004 *****87.50
Enclosed is an original	al and one(1) copy of the article	es of incorporation and a	check for:	7
□ \$70.00 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 PPY REQUIRED	
FROM:	BRIAN J. GILLIS			
· · · · · · · · · · · · · · · · · · ·	Name (Pr	inted or typed)		
	870 E. STATE ROA	D_434 ddress	SE	00
	LONGWOOD, FL 32	750	CRETA	
	City, S	State & Zip	AAAY O	-
	(407) 831-4708	TENER LAK.	FLO FLO	D
	Daytime Te	lephone number	ORID.	

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

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RTICLE I NAME	and the second s
he name of the corporation shall be:	entropy of the state of the sta
W. JACK GILLIS ENTE	
ARTICLE II PRINCIPAL OFFI	ICE ES TOTAL
The principal place of business/mailing	ng address is:
3514 Oletha Drive	
Apopka, FL 32703	جي ري ا
ARTICLE III PURPOSE	ICE ng address is:
The purpose for which the corporati	on is organized is:
medical equipment s	ales
<u>ARTICLE V INITIAL OFFICE</u> The name(s) and address(es):	RS/DIRECTORS (optional)
ARTICLE VI REGISTERED The name and Florida street address C.T. Corporation Sy 1200 S. Pine Island Plantation, FL 333	ess of the registered agent is: Vistems Road, Suite 250
ARTICLE VII INCORPORAT	
The name and address of the Incorp	porator is:
W. Jack Gillis	
3514 Oletha Drive	

Signature/Registered Agent

W. Cuck Holdstein Special assistant secretary

Date

| W. Cuck Holdstein | Date | Date