

TRANSMITTAL LETTER

**P00000074262**

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

600003338096--8  
-07/27/00--01052--010  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

**SUBJECT:** PARAMEDICAL SERVICES, INC.  
(Proposed corporate name - must include suffix)

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:** JANICE L HOLDER  
Name (Printed or typed)  
8522 GULF BLVD. #30  
Address  
NAVARRE BEACH, FLORIDA 32566  
City, State & Zip  
850-936-5030  
Daytime Telephone number

00 AUG -4 PM 1:48  
FILED  
TALLAHASSEE, FLORIDA

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



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

July 31, 2000

JANICE L. HOLDER  
8522 GULF BLVD #30  
NAVARREE BEACH, FL 32566

SUBJECT: PERAMEDICAL SERVICES, INC.  
Ref. Number: W00000018969

We have received your document for PERAMEDICAL SERVICES, INC. and your check(s) totaling \$70.00. 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) 487-6928.

Tim Burch  
Document Specialist

Letter Number: 200A00041441

# 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.

## ARTICLE I NAME

The name of the corporation shall be:

~~PARAMEDICAL SERVICES, INCORPORATED~~

SQUARE PEG, INC.

## ARTICLE II PRINCIPAL OFFICE

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

8522 GULF BLVD. #30  
NAVARRE BEACH, FLORIDA 32566

## ARTICLE III SHARES

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

~~NONE~~ ONE

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

THOMAS MERRILL  
8522 GULF BLVD. #30  
NAVARRE BEACH, FLORIDA 32566

## ARTICLE V INCORPORATOR

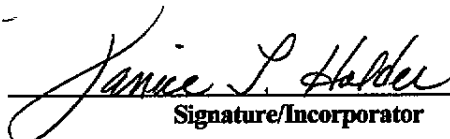
The name and address of the incorporator to these Articles of Incorporation are:

JANICE L. HOLDER  
8522 GULF BLVD. #30  
NAVARRE BEACH FLORIDA 32566

FILED  
TALLAHASSEE, FLORIDA

100 AUG -4 PM 1:48

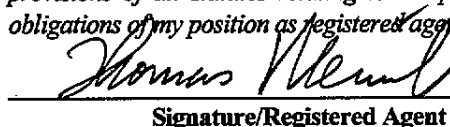
FILED

  
Signature/Incorporator

~~7-25-00~~ 8-2-00 JH  
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.

  
Signature/Registered Agent

~~7-25-00~~ 8-2-00 JH  
Date