

P00000099936

CAPITOL SERVICES d/b/a
PARALEGAL & ATTORNEY SERVICE BUREAU, INC.

(Requestor's Name)

1406 Hays Street, Suite 2

(Address)

Tallahassee, FL 32301 (904) 656-3992

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

500003436635-36

-10/24/00-01027-013

*****78.75 *****78.75

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Precision Nurse Network, Inc. (Corporation Name) (Document #)
2. _____ (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 10/24 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/> Profit	
<input type="checkbox"/> NonProfit	
<input type="checkbox"/> Limited Liability	
<input type="checkbox"/> Domestication	
<input type="checkbox"/> Other	

AMENDMENTS	
<input type="checkbox"/> Amendment	
<input type="checkbox"/> Resignation of R.A., Officer/Director	
<input type="checkbox"/> Change of Registered Agent	
<input type="checkbox"/> Dissolution/Withdrawal	
<input type="checkbox"/> Merger	

OTHER FILINGS	
<input type="checkbox"/> Annual Report	
<input type="checkbox"/> Fictitious Name	
<input type="checkbox"/> Name Reservation	

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/> Foreign	
<input type="checkbox"/> Limited Partnership	
<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Trademark	
<input type="checkbox"/> Other	

T. SMITH OCT 24 2000

Examiner's Initials

ARTICLES OF INCORPORATION
of
PRECISION NURSE NETWORK, INC.

FILED
00 OCT 24 AM 11:54
SECRETARY OF STATE
TALLAHASSEE FLORIDA

The undersigned, acting as Incorporators, desiring to form a corporation for profit pursuant to the Florida Business Corporation Act, adopt the following Articles of Incorporation for such corporation:

ARTICLE I
NAME

The name of this corporation is PRECISION NURSE NETWORK, INC.

ARTICLE II
ADDRESS OF PRINCIPAL OFFICE

The principal office and street address of this corporation is 933 Lee Road, Suite 325, Orlando, Florida 32810.

ARTICLE III
CAPITAL STOCK

This corporation is authorized to issue one thousand (1,000) shares of capital stock, which shall be designated Common Shares with no par value.

ARTICLE IV
INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 933 Lee Road, Suite 325, Orlando, Florida 32810, and the name of the initial registered agent of this corporation at that address is Felix Cristello.

ARTICLE V
INITIAL BOARD OF DIRECTORS

- A. This corporation shall have four (4) directors initially.
- B. The names and addresses of the initial members of the Board of Directors who shall hold office until their successors are duly elected and have qualified are:

Felix Cristello 641 Park Valley Circle
Clermont, FL 34711

Allen Clay Grissom 345 Bayshore, #1009
Tampa, FL 33606

James A. Braswell 1852 Union Street
Clearwater, FL 33763

Dorothy Jean M. Sorokolit 1920 Wild Valley Trail
Grand Prairie, TX 75052

ARTICLE VI
INCORPORATORS

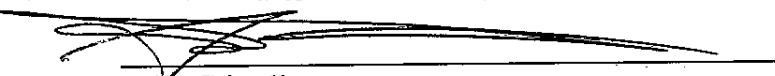
The name and address of the Incorporators of this corporation is:

Felix Cristello 641 Park Valley Circle
Clermont, FL 34711

ARTICLE VII
INDEMNIFICATION

This corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by the Florida Business Corporation Act.

IN WITNESS WHEREOF, the undersigned has executed these Articles on this 25TH day of September , 2000.


Felix Cristello
Incorporator

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: PRECISION NURSE NETWORK, INC.

2. The name and address of the registered agent and office is:

FELIX CRISTELLO

(Name)

933 Lee Road, Suite 325

(P. O. Box not acceptable)

Orlando, Florida 32810

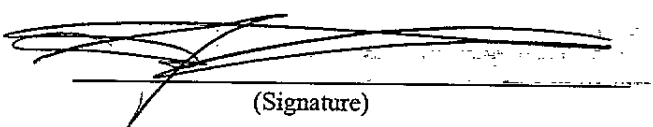
(City/State/Zip)

SECRETARY OF STATE
TALLAHASSEE FLORIDA

00 OCT 24 AM 11:54

FILED

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)

9/25/00
(Date)