

P010000 15209

TRANSMITTAL LETTER

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

FILED  
01 FEB - 8 PM 12:32  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

000003652240--5  
-02/08/01--01102--012  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: J.C. PRO MEDICAL COMPUTERS SUPPORT, 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: JUAN C. PROANO

Name (Printed or typed)

5450 N.W. 114 AVE. # 305

Address

MIAMI, FL. 33178

City, State & Zip

(305) 693-5171

Daytime Telephone number

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

Done  
2/9/01  
2v

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

## ARTICLE I NAME

The name of the corporation shall be:

J.C. PRO MEDICAL COMPUTERS SUPPORT, INC.

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TALLAHASSEE FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5450 N.W. 114 AVE. # 305

MIAMI, FL. 33178

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MEDICAL COMPUTERS SUPPORT SYSTEMS

## ARTICLE IV SHARES

The number of shares of stock is:

ONE HUNDRED (100) SHARES OF COMMON STOCK WITH A PAR VALUE OF

FIVE (5.00) DOLLARS EACH SHARES.

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

JUAN C. PROANO

5450 N.W. 114 AVE. #305 MIAMI, FL. 33178

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

JUAN C. PROANO

5450 N.W. 114 AVE. # 305

MIAMI, FL. 33178

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JUAN C. PROANO

5450 N.W. 114 AVE. # 305

MIAMI, FL. 33178

\*\*\*\*\*

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

  
\_\_\_\_\_  
Signature/Registered Agent

09-15-2000  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

09-15-2000  
\_\_\_\_\_  
Date