

TRANSMITTAL LETTER

P010000074068

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

SUBJECT: MEDICAL EDUCATION AND CONSULTING, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

600004495336--6

-07/25/01--01049--015

\*\*\*\*\*78.75 \*\*\*\*\*78.75

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: SHAREEN LYNN POLLARD  
Name (Printed or typed)

22 POLLARD PLACE  
Address

VENUS, FLORIDA 33960  
City, State & Zip

863-465-2600  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

2001 JUL 25 AM 10:38

FILED

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

13 7/27/01

# 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:

MEDICAL EDUCATION AND CONSULTING, INC.

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

POST OFFICE BOX 1133  
LAKE PLACID, FLORIDA 33862

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROVIDE EDUCATIONAL AND CONSULTING SERVICES TO THE PUBLIC.  
THESE SERVICES COVER VARIOUS TOPICS INCLUDING BUT NOT LIMITED  
TO FIRST AID AND CPR.

## ARTICLE IV SHARES

The number of shares of stock is:

1,000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

PRESIDENT: SHAREEN LYNN POLLARD  
22 POLLARD PLACE  
VENUS, FLORIDA 33960

VICE PRESIDENT: JAMES E. HILL  
126 LAKE RIDGE DRIVE  
LAKE PLACID, FLORIDA  
33852

## ARTICLE VI REGISTERED AGENT

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

SHAREEN LYNN POLLARD  
22 POLLARD PLACE  
VENUS, FLORIDA 33960

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SHAREEN LYNN POLLARD  
22 POLLARD PLACE  
VENUS, FLORIDA 33960

\*\*\*\*\*  
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

Shareen Lynn Pollard  
Signature/Registered Agent

21 July 01  
Date

Shareen Lynn Pollard  
Signature/Incorporator

21 July 01  
Date