

TRANSMITTAL LETTER
P01000075246

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

SUBJECT: AMERICAN TRANSCRIPTION OUTSOURCE MANAGEMENT INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

100004507431--6
-07/30/01--01110--002
*****78.75 *****78.75

Enclosed are 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: MARK GRIFONE
Name (Printed or typed)

5800 WINDERMERE DR.
Address

PALM HARBOR, FL. 34685
City, State & Zip

727-784-3975
Daytime Telephone number

01 JUL 30 PM 3:18
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

PS 7/31/07

ARTICLES OF INCORPORATION

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

FILED

01 JUL 30 PM 3:18

ARTICLE I NAME

The name of the corporation shall be:

AMERICAN TRANSCRIPTION OUTSOURCE MANAGEMENT INC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

5800 WINDERMERE DRIVE, PALM HARBOR FL. 34685

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MEDICAL TRANSCRIPTION MANAGEMENT

ARTICLE IV SHARES

The number of shares of stock is: *100*

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

*RETHA BRADTON, 4030 CARLYLE LAKES BLVD., PALM HARBOR FL 34685 (VP-TREAS)
DAWN GRIFONE, 5800 WINDERMERE DR, PALM HARBOR, FL. 34685 (PRES-SECRETARY)
DAVID BRADTON, 4030 CARLYLE LAKES BLVD., PALM HARBOR, FL. 34685 (PRESIDENT)
MARK GRIFONE, 5800 WINDERMERE DR, PALM HARBOR, FL. 34685 (V.P.)*

ARTICLE VI REGISTERED AGENT

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

*MARK GRIFONE
5800 WINDERMERE DR
PALM HARBOR, FL 34685*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*MARK GRIFONE
5800 WINDERMERE DR
PALM HARBOR, FL 34685*

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]

Signature/Registered Agent

7/26/01

Date

[Signature]

Signature/Incorporator

7/26/01

Date