TRANSMITTAL LETTER				
Department of State Division of Corporatio P. O. Box 6327 Tallahassee, FL 32314	•	5/3		 - <del>-</del>
SUBJECT: MEDICAL STAFF RESOURCES, INC.  (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
Enclosed is an original	and one(1) copy of the article		OOOO4575 -09/10/011 *****78.75 check for:	36475 01108016 *****78.75
	☑ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL COI	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	RICHARD YON Name (Pr	S JANES FRIZ inted or typed)	<u>ZARK</u> Y	
11210 HARBOUR SPRINGS CIRCLE				
BOCA RATON, FL 33428 City, State & Zip				
	561-852- Daytime Te	- 617Z elephone number	<u></u>	 

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

GAVE AUTHORIZATION BY PHONE TO

## 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 Staff Resources, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

11210 Harbour Springs Circle

Boca Raton, FL 33428

ARTICLE III PURPOSE

The purpose for which this corporation is organized is:

To provide services and consulting to the healthcare industry such as credentialing healthcare provides, processing and completing healthcare providers' state medical licenses and all licenses required by state and federal laws in order to provide medical and healthcare services. Complete and process healthcare providers' hospital privileges and healthcare provider health insurance applications in order to be credentialed by health insurance plans. Business will also be responsible for the recruitment and placement of healthcare providers and consulting healthcare organizations and individuals working in the industry. The foregoing purposes and activities will be interpreted as examples only and not as limitations, and nothing therein shall be deemed as prohibiting the corporation from extending its activities to any related or otherwise permissible lawful business purposes which may become necessary, profitable or desirable for the furtherance of the corporate objectives expressed above.

## ARTICLE IV SHARES

The number of shares of stock is:

100 shares

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name (s) and address(es):

Officers #1 & 2:

Richard Yon & James Irizarry - 11210 Harbour Springs Circle

P/D

V/D

Boca Raton, FL 33428

Director #1:

Travis Treadway, MD - 3228 Great Meadows Drive

Knoxville, TN 37920

Director #2:

Karla Noel, MD - 10425 SW 52<sup>nd</sup> Court

Ocala, FL 34476

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent

James Irizarry - 11210 Harbour Springs Circle, Boca Raton, FL 33428

ARTICLE VIIINCORPORATOR

Richard Yon - 11210 Harbour Springs Circle, Boca Raton, FL 33428

Having been named as registered agent to accept service of process for the above stated corportation 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

Signature/Incorporator

Date

Daté