PO108011/23384

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

	op Priority Medical Nety (PROPOSED CORPORA) ginal and one (1) copy of the arti		· ·	DCT 22 MID: 01
Enclosed and an one	سند فاعد ده رووه رد) فاعد عدد عسمو			
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:	Jaudohn Hicks			
Name (Printed or typed)				
1344 W. Concord Street				
	Orlando, FL 32805	Address 4	+0000464 ⁻ -10/22/01 *****78.75	76343 -01039020 : *****78.75
		State & Zip	44444444	· · · · · · · · · · · · · · · · · · ·
	(407) 422-5783	elephone number		÷

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



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:

Top Priority Mecical Network, Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

407 S. Parramore Avenue, Orlando, FL 32804

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide mobil medical service through out the state of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Jaudohn Hicks, President 1344 W. Concord Street

Orlando, FL 32805

ARTICLE VI REGISTERED AGENT

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

Same as above: Jaudohn Hicks

1344 W. Concord Street

Orlando, FL 32805

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Same as above : Jaudohn Hicks

1344 W. Concord Street Orlando, FL 32805

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