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TRANSMITTAL LETTER

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 MAY 21 PM 1:36

SUBJECT: UMBRA MEDICAL CORP.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: WANDA H. JUNKER

Name (Printed or typed)

8930 ROAN LANE EAST INVERNESS, FLORIDA

Address

City, State & Zip

352-860-2619

Daytime Telephone number

100005597421--5

05/22/02--01040--007
*****78.75 *****78.75

34450

Rec'd 5/21/02

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

F. GHESSER

MAY 22

Tried to
call - NO ANSWER
2 sets

102H 33040

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:

UMBRA MEDICAL CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8930 ROAN LANE EAST
INVERNESS, FLORIDA 34450

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROFIT

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):

WANDA H. JUNKER, PRESIDENT
LARRY G. JUNKER, TREASURER
LARRY G. JUNKER, SECRETARY

ARTICLE VI REGISTERED AGENT

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

LARRY G. JUNKER
8930 ROAN LANE EAST
INVERNESS, FLORIDA 34450

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LARRY G. JUNKER
8930 ROAN LANE EAST
INVERNESS, FLORIDA 34450

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

5/20/02
Date



Signature/Incorporator

5/20/02
Date

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