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TRANSMITTAL LETTER

FILED

02 JUL -8 PM 12: 11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

000006246350--0
-07/08/02--01037--014
*****78.75 *****78.75

SUBJECT: Nurse Robertson, Inc.
(Proposed corporate name – must include suffix)

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

X \$78.75
Filing Fee &
Certified Copy

___ \$131.25
Filing Fee,
Certified Copy &
Certificate

FROM:

Mary Alice Robertson
509 North Perry Ave.
Jupiter, FL 33458
561-747-1513

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

7/10/02
[Signature]

ARTICLES OF INCORPORATION

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Nurse Robertson, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

509 North Perry Ave.
Jupiter, FL 33458

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Mary Alice Robertson
509 North Perry Ave.
Jupiter, FL 33458
561-747-1513

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Mary Alice Robertson
509 North Perry Ave.
Jupiter, FL 33458
561-747-1513

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 5th Day of July 2002.



Signature

Signature

Signature

**Articles of Incorporation
Filing Fee - \$35**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF

REGISTERD AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The Name of the corporation is:

Nurse Robertson, Inc.

2. The Name and address of the registered agent and office is:

Mary Alice Robertson

509 North Perry Ave.
Jupiter, FL 33458

561-747-1513

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Signature)

7-5-02
(Date)