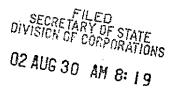
# TRANSMITTAL LETTER



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

SUBJECT: Enclosed is an original and one(1) copy of the articles of incorporation and a check for : **Á** \$78.75 \$87.50 \$70.00 \$78.75 Filing Fee Filing Fee, Filing Fee Filing Fee & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: \*\*\*\*\*78.75 566-1720 Daytime Telephone number

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

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ARTICLES OF INCORPORATION	ORATIO	RPO	CO	TN	$\mathbf{OF}$	OT TO	DTIC	Ā
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In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

DIVISION OF CORPORATIONS

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A	RT	ICLE	I	<u>NAME</u>

The name of the corporation shall be:

Sandals Medical Transcription INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1510 Belleau Wood Drive Tallahassee FL 32308

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

contract medical transcription

#### 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):

JANELLE U. DAVIS
1510 BELLEAU WOOD Dr.

TALLAMASSEE, Fr. 32308 PRES. SEC. THOMS.

### ARTICLE VI REGISTERED AGENT

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

JANELLE U. DAVIS 1510 BELLEAUWOOD DV. TALCAMASSEE, FZ-32308

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JANELLE U. DAVIS 1510 BELLEAUWODD DR. TALLAHASSEE, FZ. 32308

Signature/Registered Agent

8/25/02

Date

8/25/02 Date

Signature/Incorporator