

TRANSMITTAL LETTER

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
02 AUG 30 AM 8:19

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

SUBJECT: SANDALS MEDICAL TRANSCRIPTIONS 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 of Status

☒ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: JANELLE DAVIS  
Name (Printed or typed)

P.O. Box 6857  
Address

DESTIN, FL. 32530  
City, State & Zip

566-1720  
Daytime Telephone number

000007445810--0  
-08/30/02--01017--001  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

RECEIVED  
02 AUG 30 AM 8:20  
DIVISION OF CORPORATION

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

DB 8/30

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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## ARTICLE I NAME

The name of the corporation shall be:

Sandals Medical Transcription INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling 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.  
TALLAHASSEE, FL. 32308 PRES. SEC. TREAS.

## ARTICLE VI REGISTERED AGENT

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

JANELLE U. DAVIS  
1510 BELLEAUWOOD DR.  
TALLAHASSEE, FL. 32308

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JANELLE U. DAVIS  
1510 BELLEAUWOOD DR.  
TALLAHASSEE, FL. 32308

\*\*\*\*\*  
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

Janelle U Davis  
Signature/Registered Agent

8/25/02  
Date

Janelle U Davis  
Signature/Incorporator

8/25/02  
Date