

**P03000056589**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

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✓

gsl

## TRANSMITTAL LETTER

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

**SUBJECT:** SUPERIOR X-RAY, INC.  
(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:** ROBERT GAGER  
Name (Printed or typed)

6816 BUXTON AVE  
Address

COCOA, FL 32927  
City, State & Zip

321- 508 - 6498  
Daytime Telephone 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:

SUPERIOR X-RAY, INC.

**ARTICLE II      PRINCIPAL OFFICE**

The principal place of business/mailling address is:

6816 BUXTON AVE  
COCOA, FL 32927

**ARTICLE III      PURPOSE**

The purpose for which the corporation is organized is:

SALES, SERVICE & MAINTENANCE OF MEDICAL IMAGING EQUIPMENT

**ARTICLE IV      SHARES**

The number of shares of stock is:

5,000

**ARTICLES V      INITIAL OFFICERS/DIRECTORS (optional)**

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

**ARTICLE VI      REGISTERED AGENT**

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

PAMELA E CARLILE  
6600 CG RANCH LN  
SCOTTSMOOR, FL 32775

**ARTICLE VII      INCORPORATOR**

The name and address of the Incorporator is:

ROBERT GAGER  
6816 BUXTON AVE  
COCOA, FL 32927

\*\*\*\*\*

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

5/2/03

Date



Signature/Incorporator

5/9/03

Date

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03 MAY 14 PM 2:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA