	4 4 1	Po	30000	6	1494
--	----------	----	-------	---	------

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of S	tatus
Special Instructions to Filing Officer:	
Office Use Only	



- - - -

200019079752 05720/03--01005--001 ***37.50

17 I.L. **ED 03 JUN -4 PM 4: 19** SEGRETARY OF STATE TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

• •

Nc. SUBJECT: (PROP 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

R. wood ELMER FROM: Name (Printed or typed) Rev. Elmer R. Wood, D.Div. 15400 Roosevelt Blvd, #109 Clearwater, FL 33760-3562 727-532-8664 -- 800-330-8425 FAX: 727-532-8665 e-mail: elmer.wood@verizon.net

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 28, 2003

·

REV. ELMER R. WOOD, D.DIV. 15400 ROOSEVELT BLVD. #109 CLEARWATER, FL 33760-3562

SUBJECT: AMB, INC. Ref. Number: W03000015123

We have received your document for AMB, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

You must list the corporation's principal office and/or a mailing address in the document.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Ingram Document Specialist New Filings Section

Letter Number: 403A00033481

ARTICLES OF INCORPORATION

OF

FILED

SUPERIOR MEDICAL CLAIMS, INC.

03 JUN -4 PM 4: 19 SECRETARY OF STATE TALLAHASSEE. FLORIDA

ARTICLE I – NAME

The name of the Corporation is: SUPERIOR MEDICAL CLAIMS, INC.

.

ARTICLE II – DURATION

This Corporation shall have perpetual existence and shall commence upon the filing of these articles with the Department of State, Florida.

ARTICLE III – PURPOSE

This Corporation is organized for the purpose of promoting optimal health and transacting any and all lawful business.

ARTICLE IV – CAPITAL STOCK

This Corporation is authorized to issue Ten Thousand (10,000) shares of One Dollar (\$1.00) par value common stock.

ARTICLE V – VOTING RIGHTS

Except as otherwise provided by law, the entire voting power for the election of directors and for all other purposes shall be vested exclusively in the holders of the outstanding common shares.

ARTICLE VI – PRE-EMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without the issuance of fractional shares) at the price at which is offered to others.

ARTICLE VII – INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is: 15400 Roosevelt Blvd # 109,

ì

Clearwater, FL 33760-3562 and the name of the initial registered agent of this Corporation at that address is

Elmer R. Wood.

ARTICLE VII – INITIAL BOARD OF DIRECTORS

This Corporation shall have one (1) director initially. The number of directors may be either increased or diminished from time to time by the by-laws, but shall never have less than one (1). The name and address of the initial director of this Corporation is as follows: Elmer R. Wood, President/Treasurer 15400 Roosevelt Blvd. # 109, Clearwater, FL 33760-3562

ARTICLE XIII – AMENDMENT

This Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, any right conferred upon the shareholders is subject to this reservation. IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation, this 3^{-1} day of

(fune___. 2003

ARTICLE IX - CAPITAL STOCK AND CAPITAL TO BEGIN BUSINESS

The stock of this corporation shall be issued pursuant to a plan under Section 1244 of the Internal Revenue Code of 1954 as amended. The amount of capital which this corporation will begin business shall not be less than Five Hundred Dollars (\$500.00).

ARTICLE X – BY-LAWS

The power to adopt, alter, amend or repeal the By-Laws shall be vested in the Board of Directors and the shareholders.

ARTICLE XI - INCORPORATOR

The name of the person signing these Articles is: Elmer R. Wood

ARTICLE XII – INDEMNIFICATION

The Corporation shall indemnify any officer or director or any former officer or director to

the full extent permitted by law.

ARTICLE XIII – AMENDMENT

This Corporation reserves the right to amend or repeal any provisions contained in these Articles of

Incorporation, or any amendment hereto, any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation, this 3^{-2} day of

une 2003 Signed:

Print Name: ELMER R. WOOD

STATE OF: FLORIDA

COUNTY OF PINELLAS

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared, <u>Elmer R. Wood</u>, personally known by me to be the person who executed the foregoing Articles of <u>SUPERIOR MEDICAL CLAIMS, INC.</u> and that person acknowledged before me that he executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County

aforesaid, this day of June NOTARY PUBLIC: OFFICIAL NOTARY SEAL **JUDY M HITE** NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC924310 LY COMMISSION EXP. APR 21 2004

My Commission Expires: 4121104

Date: 6-3-03

CERTIFICATION

DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVING PROCESS WITHIN THIS STATE NAMING UPON WHOM PROCESS MY BE SERVED.

In pursuant to Florida Statutes, the following is submitted in compliance with said act.

FIRST: SUPERIOR MEDICAL CLAIMS, INC. desiring to organize under laws of the State of Florida with

its initial principal registered office, as indicated in the Articles of Incorporation at

15400 Roosevelt Blvd. # 109

Clearwater, FL 33760-3562

Named:

Elmer R. Wood

15400 Roosevelt Blvd. # 109

FILED JUN-4 PH 4: 19 ASECNETARY OF STATEA

Clearwater, FL 33760-3562, as its agent TO ACCEPT SERVICE OF PROCESS WITHIN THIS STATE.

ACKNOWLEDGEMENT;

Having been named to accept service of process for the above named Corporation, at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of said act

relative to keeping open said office. Almer R. Wood Registered Agent: