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TRANSMITTAL LETTER

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

SUBJECT:	EMEDALERT, INC Proposed Corporate Name – <u>Must include Su</u>	uttix .	
Enclosed are an orig	ginal and one (1) copy of the articles of incorporat	tion and a check for:	
	전 \$78.75 Filing Fee & Certified Copy		
From:	EMEDALERT, INC., Name 5410 S FL Ave, Ste 12 Address	•	
-	Lakeland, FL 33810 City, State & Zip 863-648-4467 Daytime Telephone Number		

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

ARTICLES OF INCORPORATION

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SECHELL SI STATE TALLAHASSEE, FLORIDA

ARTICLE I - NAME The name of the corporation shall be: EMEDALERT, INC...

ARTICLE II - PRINCIPAL OFFICE

The principal place of business/mailing address is: 5410 S FL Ave, Ste 12 Lakeland, FL 33813

ARTICLE III - PURPOSE

The purpose for which the corporation is organized is: Medical information and all other lawful business.

ARTICLE IV - SHARES

The number of shares of stock is: One thousand (1,000)

ARTICLE V - INITIAL OFFICERS/DIRECTORS

Frank D. Puissegur Robert E. Sponaugle Michael W. Coker Barbara A. Skinner

ARTICLE VI - REGISTERED AGENT

The name and Florida street address of the registered agent is: Frank D. Puissegur 5410 S FL Ave, Ste 12 Lakeland, FL 33813

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Frank D. Puissegur 5410 S FL Ave, Ste 12 Lakeland, FL 33813

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/Incorporator

 $\frac{7 \cdot 3 \cdot 03}{\text{Date}}$ $\frac{7 \cdot 3 \cdot 03}{2 \cdot 2 \cdot 2}$