Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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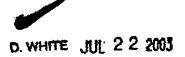
From:

Account Name : INCORPORATETIME.COM, INC.

Account Number : I19990000221 Phone : (631)224-9004 Fax Number : (631)218-9522

FLORIDA PROFIT CORPORATION OR P.A.

Clinical Research Solutions, Inc.



Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

THE UNDERSIGNED INCORPORATION FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, HEREBY ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE | -NAME

THE NAME OF THE CORPORATION SHALL BE:

Clinical Research Solutions, Inc.

ARTICLE II -PRINCIPAL OFFICE

The principal place of business & mailing address of this corporation shall be

1771 Wavecrest Street Merritt Island, FL 32952

ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have at any one time is:

2000 shares at \$.01 par value

ARTICLE IV -INITIAL OFFICERS/DIRECTORS:

President/Treasurer/Secretary/Director: Fatima Phillips 1771 Wavecrest Street
Merritt Island, FL 32952
V.President/Director: Abdur Rashid 1771 Wavecrest Street, Merritt Island
FL 32952

ARTICLE V -INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address of the initial registered agent are:

Fatima Phillips 1771 Wavecrost Street, Merritt Island, FL 32952

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SECRETARY OF STATE TALLAHASSEE FLORIDA

ARTICLE VI-INCORPORATOR:

The name and address of the Incorporator to these Articles of Incorporation are:

Kerry Walsh 35 Carleton Avenue Islip Terrace, NY 11752

Kerry Walsh, Incorporator

Date ce of process for the

Having been named registered agent and to accept service of process for the above stated corporation as the place designated in this certificate I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Fetime Phillips Registered Agent

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