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SECRETARY OF STATE
AND ASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT:	PWDT	Incorpor	akd
	(PROPOSED CORPORATE	NAME – MUST INÇLUDI	e suffix ₁
Enclosed is an origin	nal and one(1) copy of the artic	les of incorporation and a	check for
Lifetosed is all origin	ial and one(1) copy of the artic	ies of incorporation and a	CHECK IOI .
□ \$70.00 ⁻	□ \$78.75	\$78.75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of
			Status
		ADDITIONAL COPY REQUIRED	

Proposition
Name (Printed or typed)

Hoss Grand Street
Address

City, State & Zip

Daytime Telephone number

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

FILED

À	RTICI	LES C	F IN	CORP	ORATION
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In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

03 SEP -2 PM 4: 23 SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

PMD OF ORLANDO, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4653 CARMEL ST ORLANDO FC 32808

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: CONSULTING FIRM

ARTICLE IV SHARES

The number of shares of stock is:

10,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

PATRICIA M DIS RUD (PRES)

MICHAEL P SUTTON (UP)

ARTICLE VI REGISTERED AGENT

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

4653 CARNEL ST OPLANDO FC 32808

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHAEL P STITON 4653 CARMER ST ORCANDO FC 32808

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

8-28-03