## P04000109803

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## TRANSMITTAL LETTER

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

subject: <u>H</u>	ealth Outreach So (Proposed corpora	ciety Inc.	The Attended
	(FROPOSED CORPORA	tie name – <u>most incl</u>	ODE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	icles of incorporation and	a check for:
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	Alan Rosenthal C	PA (Printed or typed)	
-	3300 University	DR. Ste 305 Address	
-	Coral Springs, Fl	baac & Esp	
_	(954) 758- Daytime T	elephone 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)	The second secon
ARTICLE I NAME The name of the corporation shall be:	04 300 25 PM to 15
Health Outreach Society, Inc.	TALLAHASSEE, H CHIDA
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  1000 E. Hillsboro Blud. # 105  Decretical Beach, FL  33441	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	
Medical Video Production Company	
ARTICLE IV SHARES The number of shares of stock is:	
100	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTO	<u>PRS</u>
List name(s), address(es) and specific title(s):	P 1-
P. Doug Scott - President Walter Burbon Vice 8723 NW 5845 ct. 4280 NE 2312 A	racsident
8723 NW 3815 Ct. Lighthouse Point	Ne. Fi
PARKLAND, FL Lighthouse Point, 33067	33064
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable)	of the registered agent is:
P. Doug Scott	
1000 E. Hillsboro Blud. #105	
Deerfield Beach, FC 33442	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
P. Doug Scott 1000 E. Hillsbore Blud. #105	
1000 E. Hillsbore Blud. #105	
Decafield Brach, FL 33442	
**************************************	************
Having been named as registered agent to accept service of process for the abo	
certificate, I am familiar with and eccept the appointment as registered agent and	d agree to act in this capacity
	7/20/11
Signature/Registered/Agent	Date
	_'/_/
(10)	7/20/04
Signature/fincorporator	Date