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## TRANSMITTAL LETTER

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

SUBJECT:	Quality Healths (PROPOSED CORPORA)	are Solution	ins, Inc,	
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )				
Enclosed are an orig	inal and one (1) copy of the artic	cles 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 CO	PY REQUIRED	
FROM: Richard P. Galloway Jr. Name (Printed or typed)				
1908 Carriage Ct. Address				
Plant City Fl. 33566 City, State & Zip				
813-843-336/ Daytime Telephone number				

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

RTICLES OF INCORPORATION compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	O4 NO TALLY
RTICLE I NAME	W 21
e name of the corporation shall be:	
Quality Healthcare Solutie	ons , INC. R D
e name of the corporation shall be:  PTICLE I NAME  E name of the corporation shall be:  PTICLE II PRINCIPAL OFFICE  E principal place of business/mailing address is:  1908 Carriage Ct.  Plant City, Fla. 33566	
RTICLE III PURPOSE  ne purpose for which the corporation is organized is:	
To conduct business in the	state of Florida
RTICLE IV SHARES  ne number of shares of stock is:  1000 Shares	
RTICLE V INITIAL OFFICERS AND/OR DIRECTORS ist name(s), address(es) and specific title(s):	
Richard P. Galloway Jr.	President
1908 Carriage Ct. Plant City, Fla. 33566	
RTICLE VI REGISTERED AGENT	
he name and Florida street address (P.O. Box NOT acceptable) of the reg	istered agent is:
Richard P. Galloway JV. 1908 Carriage Ct. Plant City, Fla. 33566 RTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:  Richard P. Galloway Jv.	
1908 carriage Ct. Plant City, Fla. 33566	
************************	********
laving been named as registered agent to accept service of process for the above stated co ertificate, I am familiar with and accept the appointment as registered agent and agree to a	orporation at the place designated in this ect in this capacity
Signature/Registered Agent	11/20 / 04 Date
	11/20/04
Signature/Incorporator	Date