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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers MAR 30 2005

## TRANSMITTAL LETTER

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

**SUBJECT:** VELEZ CPR & MORE INC

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles 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 COPY REQUIRED**

**FROM:** DANIEL VELEZ

Name (Printed or typed)

513 BROCKWAY AVE

Address

ORLANDO FL 32807

City, State & Zip

407-382-6642

Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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)

### **ARTICLE I      NAME**

The name of the corporation shall be:

VELEZ CPR & MORE INC

### **ARTICLE II      PRINCIPAL OFFICE**

The principal place of business/mailling address is:

513 BROCKWAY AVE  
ORLANDO FL 32807

### **ARTICLE III      PURPOSE**

The purpose for which the corporation is organized is:  
TO PROVIDE CPR CLASS SERVICES

### **ARTICLE IV      SHARES**

The number of shares of stock is:  
200

### **ARTICLE V      INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

DANIEL VELEZ- PRESIDENT  
513 BROCKWAY AVE  
ORLANDO FL 32807

### **ARTICLE VI      REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

DANIEL VELEZ  
513 BROCKWAY AVE  
ORLANDO FL 32807

### **ARTICLE VII      INCORPORATOR**

The name and address of the Incorporator is:

DANIEL VELEZ  
513 BROCKWAY AVE  
ORLANDO FL 32807

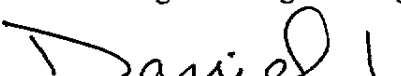
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*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Signature/Registered Agent

3/21/2005

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

3/21/2005

\_\_\_\_\_  
Date

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