

PD50000 71297

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

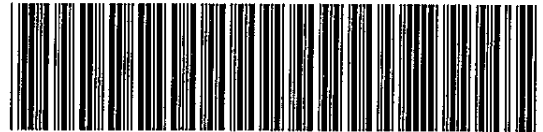
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05/02/05--01009--022 **78.75

FILED

05 MAY 12 PM 3:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. WHITE MAY 16 2005

TRANSMITTAL LETTER

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

SUBJECT: Event Medical Services 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: Adam Graetz
Name (Printed or typed)

2465 12th Ave SW
Address

Largo, FL 33770
City, State & Zip

727 584-0542
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 5, 2005

ADAM GRAETZ
2465 12TH AVENUE SW
LARGO, FL 33770

SUBJECT: EVENT MEDICAL SERVICES INC.
Ref. Number: W05000022713

We have received your document for EVENT MEDICAL SERVICES INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the application.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White
Document Specialist
New Filings Section

Letter Number: 405A00032128

RECEIVED
05 MAY 12 AM 10:50
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED
05 MAY 12 PM 3:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Event Medical Services Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2465 12th Ave Sw
Largo, FL 33770

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

100 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Adam Graetz
2465 12th Ave SW
Largo, FL 33770
President

ARTICLE VI REGISTERED AGENT

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

Adam Graetz
2465 12th Ave SW
Largo, FL 33770

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Adam Graetz
2465 12th Ave SW
Largo, FL 33770

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

05-10-2005

Date



Signature/Incorporator

05-10-2005

Date