

POS0000075462

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

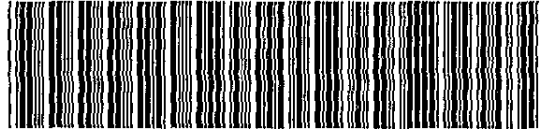
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05 MAY 24 PM 3:58

SEUL HAN CO. JAPAN
TALLAHASSEE, FLORIDA

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05 MAY 24 PM 3:52

SEUL HAN CO. JAPAN
TALLAHASSEE, FLORIDA

T. Hampton MAY 24 2005

TRANSMITTAL LETTER

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

SUBJECT: Capital City Medical Supply, 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: Barry Hartin
Name (Printed or typed)

3764 Forsythe Way

Address

Tallahassee, FL 32309

City, State & Zip

850-894-8414

Daytime Telephone 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)

ARTICLE I NAME

The name of the corporation shall be:

Capital City Medical Supply, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address shall be:

1108 Thomasville Road, Tallahassee, Florida 32303

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and lawful business

ARTICLE IV SHARES

The number of shares of stock is:

100 (common)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Chairman/CEO: Jeanine Hartin – 3764 Forsythe Way, Tallahassee, FL 32309

Vice Chairman/CFO: Barry Hartin – 3764 Forsythe Way, Tallahassee, FL 32309

REGISTERED AGENT

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


Barry Hartin - 3764 Forsythe Way, Tallahassee, FL 32309

ARTICLE VII INCORPORATOR

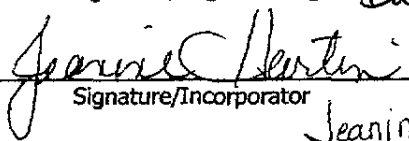
The name and address of the incorporator is:

Jeanine Hartin – 3764 Forsythe Way, Tallahassee, FL 32309

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 Barry Hartin



Signature/Incorporator Jeanine Hartin

FILED

05 MAY 24 PM 3:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5-24-05

Date

5/24/05

Date