

P05000102801

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

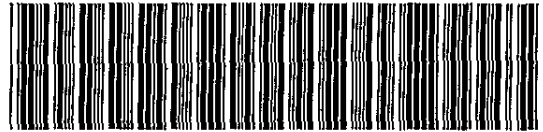
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900057582239

117/22/05--01007--005 **70.00

FILED
05 JUL 22 PM 4: 21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch JUL 22 2005

TRANSMITTAL LETTER

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

SUBJECT: MAJOR CARE, 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: RICHARD E. HERTHNECK, ESQ.

Name (Printed or typed)

20220 CENTER RIDGE ROAD, SUITE 304

Address

ROCKY RIVER, OH 44116

City, State & Zip

440-331-4660

Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and the Corporation Code, F.S. (607.01)

ARTICLE I NAME

The name of the corporation shall be:

MAJOR CARE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1941 WHITFIELD PARK LOOP, SARASOTA, FL 34243

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH CORPORATIONS MAY BE FORMED UNDER APPLICABLE FLORIDA LAW.

ARTICLE IV SHARES

The number of shares of stock is:

500 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARTICLE VI REGISTERED AGENT

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

ALLISON KALICHARAN
1941 WHITFIELD PARK LOOP
SARASOTA, FL 34243

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

STEPHEN CURTIS
1941 WHITFIELD PARK LOOP
SARASOTA, FL 34243

I, _____, have been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate. I do so with and accept the appointment as registered agent and agree to act in this capacity.

Allison Kalicharan
Signature/Registered Agent

7/11/05
Date

Stephen Curtis

Signature/Incorporator

7/11/05
Date