

PO5000132830

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

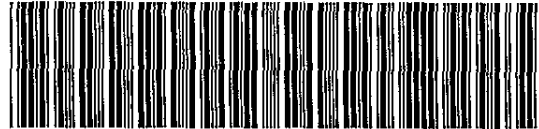
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800059930608

09/28/05--01014--007 \*\*70.00

FILED  
05 SEP 28 AM 7:50  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

✓/PL 912965

**COVER LETTER**

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

SUBJECT: Central Florida Medical Consulting, 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: Robert L Rogers  
(Name (Printed or typed))

608 Mango Drive  
Address

Melbourne Beach, FL 32951  
City, State & Zip

301-698-2837  
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:

Central Florida Medical Consulting

FILED  
05 SEP 28 AM 7:50  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

605 Mango Drive, Melbourne Bch, FL 32951

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Medical Consulting

**ARTICLE IV SHARES**

The number of shares of stock is:

100

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

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

Robert L Rogers 605 Mango Drive, Melbourne Beach, FL 32951 President.  
Marcella R Rogers 605 Mango Drive, Melbourne Beach, FL 32951 Vice President

**ARTICLE VI REGISTERED AGENT**

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

Robert L Rogers 605 Mango Drive, Melbourne Bch, FL 32951

**ARTICLE VII INCORPORATOR**


The name and address of the Incorporator is:

Robert L Rogers 605 Mango Drive, Melbourne Bch 32951

\*\*\*\*\*

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

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

09-19-2005  
\_\_\_\_\_  
Date

09-19-2005  
\_\_\_\_\_  
Date