

P06000065/00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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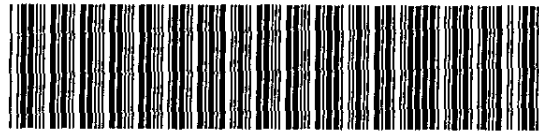
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
06 MAY -8 PM 4:51
U.S. DEPT. OF JUSTICE

COVER LETTER

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

SUBJECT: Clinical Research Consulting Incorporated
(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: Traci L. Kimes RN, BSN
Name (Printed or typed)

P.O. BOX 616 831
Address

Orlando Florida 32861-6831
City, State & Zip

(407) 523-0697
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)

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CLERK OF COURT
STATE OF FLORIDA

ARTICLE I NAME

The name of the corporation shall be: Clinical Research Consulting, Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: Post Office Box 616831, Orlando, Florida 32861-6831

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide personal service of consulting for clinical research. The service will be performed by employee-owner.

ARTICLE IV SHARES

The number of shares of stock is equal to 100'

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Traci L. Kimes, RN, BSN, 4431 Oakton Drive, Orlando, FL 32818-Principal Officer

ARTICLE VI REGISTERED AGENT

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

Traci L. Kimes, RN, BSN, 4431 Oakton Drive, Orlando, FL 32818

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Traci L. Kimes, RN, BSN, 4431 Oakton Drive, Orlando, FL 32818

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

Traci L. Kimes RN, BSN
Signature/Registered Agent

5/3/06
Date

Traci L. Kimes RN, BSN
Signature/Incorporator

5/3/06
Date