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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

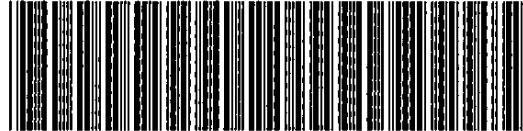
(Business Entity Name)

(Document Number)

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DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

06 NOV 20 PM 2:09

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Keys EMS, Inc.

Signature \_\_\_\_\_

Requested by: \_\_\_\_\_

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

- ☒ Art of Inc. File \_\_\_\_\_
- \_\_\_\_\_ LTD Partnership File \_\_\_\_\_
- \_\_\_\_\_ Foreign Corp. File \_\_\_\_\_
- \_\_\_\_\_ L.C. File \_\_\_\_\_
- \_\_\_\_\_ Fictitious Name File \_\_\_\_\_
- \_\_\_\_\_ Trade/Service Mark \_\_\_\_\_
- \_\_\_\_\_ Merger File \_\_\_\_\_
- \_\_\_\_\_ Art. of Amend. File \_\_\_\_\_
- \_\_\_\_\_ RA Resignation \_\_\_\_\_
- \_\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_
- \_\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_
- ☒ Cert. Copy \_\_\_\_\_
- \_\_\_\_\_ Photo Copy \_\_\_\_\_
- \_\_\_\_\_ Certificate of Good Standing \_\_\_\_\_
- \_\_\_\_\_ Certificate of Status \_\_\_\_\_
- \_\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_
- \_\_\_\_\_ Corp Record Search \_\_\_\_\_
- \_\_\_\_\_ Officer Search \_\_\_\_\_
- \_\_\_\_\_ Fictitious Search \_\_\_\_\_
- \_\_\_\_\_ Fictitious Owner Search \_\_\_\_\_
- \_\_\_\_\_ Vehicle Search \_\_\_\_\_
- \_\_\_\_\_ Driving Record \_\_\_\_\_
- \_\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_
- \_\_\_\_\_ UCC 11 Search \_\_\_\_\_
- \_\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_
- \_\_\_\_\_ Courier \_\_\_\_\_

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**ARTICLES OF INCORPORATION**

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**OF**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**KEYS EMS, INC.**

The undersigned subscriber to the Articles of Incorporation, a natural person,  
competent to contract, hereby forms a corporation under the laws of the State of  
Florida.

The name of the corporation is: **KEYS EMS, INC.**

**I. PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS**

The address of the principal office is:

30360 Overseas Highway, Big Pine Key, FL 33043

and the mailing address is 30360 Overseas Highway, Big Pine Key, FL 33043

**II. TERM OF EXISTENCE**

The Corporation shall exist in perpetuity. The date and time of the commencement  
of the corporate existence shall be January 2, 2007.

**III. NATURE OF BUSINESS**

The general nature of the business to be conducted by this corporation is limited to:

**INTERFACILITY MEDICAL TRANSPORTATION**

**IV. QUALIFICATIONS OF MEMBERS**

The qualifications for members and the manner of their admission shall be as regulated by the bylaws.

**V. INITIAL REGISTERED AGENT**

The initial registered agent of the Corporation shall be **DANIEL A. COLL**

**VI. INITIAL REGISTERED OFFICE**

The street address of the initial registered office of the corporation is:

30360 Overseas Highway  
Big Pine Key, FL 33043

**VII. DIRECTORS**

A board of one director shall exercise this corporation initially. The number of directors may be increased from time to time by bylaws adopted by the stockholders.

**VIII. INITIAL DIRECTORS**

The names and addresses of the initial director(s) is as follows:

DANIEL A. COLL, PRESIDENT  
30360 Overseas Highway  
Big Pine Key, FL 33043

**IX. INCORPORATOR**

The incorporator is:

DANIEL A. COLL  
30360 OVERSEAS HIGHWAY, BIG PINE KEY, FL 33043

**X. AMENDMENT**

The articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved at a stockholders meeting by a majority of the stockholders entitled to vote thereon, unless all of the Directors and all of the stockholders sign a written statement manifesting their intention that a certain amendment of the Articles of Incorporation be made.

**XI. CAPITAL STOCK**

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred shares of common stock having a nominal per value of one-dollar (\$1.00) per share.

  
DANIEL A. COLL

STATE OF FLORIDA


COUNTY OF MONROE

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County named above to take acknowledgements, personally appeared, Daniel A. Coll, to me known to be the person described as Incorporator, and he acknowledged before me that he executed the same.

WITNESS my hand and official seal in the county of Monroe, State of Florida, this 16<sup>th</sup> day of November 2006.



**Debra Farrell**  
Commission # DD544339  
Expires June 11, 2010  
Bonded Troy Pain - Insurance, Inc. 800-365-7019

  
Notary Public, State of Florida

My commission expires: 6/11/2010

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES,  
THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE  
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING  
THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

**KEYS EMS, INC.**

2. The name and address of the registered agent and office is:

DANIEL A. COLL  
KEYS EMS, INC.  
30360 OVERSEAS HIGHWAY  
BIG PINE KEY, FL 33043

Having been named as registered agent and to accept service of process for the  
above stated corporation, at the place designated in this certificate, I hereby accept  
the appointment as registered agent and agree to act in this capacity. I further agree  
to comply with the provisions of all statutes relating to the proper and complete  
performance of my duties, and I am familiar with and accept the obligations of my  
position as registered agent.

  
\_\_\_\_\_  
DANIEL A. COLL

11/16/08  
\_\_\_\_\_  
DATE

11/16/08  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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