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(Requestor's Name)		
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Certified Copies	Certificate	s of Status
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SECRETARY OF STATE

COVER LETTER

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

SUBJECT: CRI	SPJO MEDICAL & ARTS	S, INC.	
	(PROPOSED CORPORAT	TE NAME – <u>MUST INCL</u>	UDESUFFIX)
Enclosed are an ori	iginal and one (1) copy of the artic	eles of incorporation and	a check for:
[] #70.00			
✓ \$70.00 Filing Fee	\$78.75	\$78.75	□ \$87.50
rining rec	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy
	or community of blands	ac corumed copy	& Certificate of
	,		Status
	ADDITIONAL COPY REQUIRED		PY REQUIRED
		<u> </u>	
	Joan Contardo		
FROM: _		Printed or typed)	
	· ············	ristor or typou)	
	4649 32nd Ct. East		
	A	ddress	
	Bradenton, FL 34203		
	City, S	State & Zip	
	044 700 4000		
	941-720-1929	lephone number	
	Daytime re	achione namber	

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:

CRISPJO MEDICAL & ARTS, INC.

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WITH SEE FORE

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4649 32nd Ct. East, Bradenton, FL 34203

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Anesthesia / Photography

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):

Joan P. Contardo, President/Treasurer

4649 32nd Ct. East Bradenton, FL 34203 Paul R. Contardo, Vice-President/Secretary

4649 32nd Ct. East

Bradenton, FL 34203

ARTICLE VI REGISTERED AGENT

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

Joan P. Contardo 4649 32nd Ct. East Bradenton, FL 34203

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Joan P. Contardo 4649 32nd Ct. East Bradenton, FL 34203

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/Incorporator

Joan P. Cartardo
Signature/Incorporator

12-12-06
Date
12-12-06
Date