

PD7000061527

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

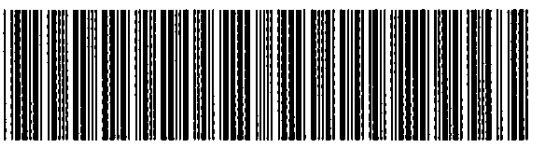
(Business Entity Name)

(Document Number)

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

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05/24/07--01002--001 \*\*78.75

RECEIVED  
07 MAY 23 PM 2:48  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
07 MAY 23 PM 2:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRS  
5/23

**COVER LETTER**

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

SUBJECT: Genesis Non Medical 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: Priscilla M. Johnson  
Name (Printed or typed)

P.O. Box 5374  
Address

Tallahassee, FL 32314  
City, State & Zip

(850) 879-0972  
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)

**FILED**

**ARTICLE I NAME**

The name of the corporation shall be:

Genesis Non Medical Inc.

07 MAY 23 PM 2:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

~~P.O. Box 5374 (8130 Pine Oak Rd)~~  
Tallahassee, FL 32305

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO EXPAND / OFFER SERVICE  
to the Big Bend area etc.

**ARTICLE IV SHARES**

The number of shares of stock is:

1

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

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

Priscilla M. Johnson - CEO  
8130 Pine Oak Rd  
Tallahassee, FL 32305

**ARTICLE VI REGISTERED AGENT**

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

Priscilla M. Johnson  
8130 Pine Oak Rd  
Tallahassee, FL 32305

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Priscilla M. Johnson  
8130 Pine Oak Rd, Tall, FL 32305

\*\*\*\*\*  
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

Priscilla M. Johnson  
Signature/Registered Agent  
Priscilla M. Johnson  
Signature/Incorporator

5/23/07  
Date  
5/23/07  
Date