

COVER LETTER

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

SUBJECT: Keys Group Medical Delivery, 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: Rodney M. Keys

Name (Printed or typed)

5458 Hoffner Road, Suite 302

Address

Orlando, Florida 32812

City, State & Zip

407-348-1883

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:

KEYS GROUP MEDICAL DELIVERY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
5458 HOFFNER ROAD, SUITE 302
ORLANDO, FLORIDA 32812

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
KEYS GROUP MEDICAL DELIVERY, INC.

ARTICLE IV SHARES

The number of shares of stock is:
1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

BRADY KEYS, JR
2931 BANCHORY ROAD
ORLANDO, FLORIDA 32792
CHAIRMAN AND CHIEF EXECUTIVE

LEONARD E. BURNETT
14341LORD BARCLAY DRIVE
ORLANDO, FLORIDA 32837
SENIOR VICE PRESIDENT

RODNEY M. KEYS
6538 ABBEYDALE COURT
ORLANDO, FLORIDA 32818

CHIEF OPERATING OFFICER

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2000 FEB 11 PM 2:18

FILED

ARTICLE VI REGISTERED AGENT

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

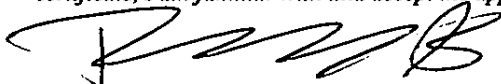
RODNEY M. KEYS
5458 HOFFNER ROAD, SUITE 302
ORLANDO, FLORIDA 32812

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

RODNEY M. KEYS
5458 HOFFNER ROAD, SUITE 302
ORLANDO, FLORIDA 32812

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

2/6/08

Date

2/6/08

Signature/Incorporator

Date

FILED
2008 FEB 11 PM 2:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA