# P08000022031

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:  Dean Awarnick Gave  AUTHORIZATION BY PHONE TO  CORRECT ARTICLE VIII  DATE 3/3/08  DOC. EXAM. A.A.				

Office Use Only



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SECRETARY OF STATE ALLAHASSEE, FLORID/

FILED 2008 FEB 28 AM II: 39

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# FLORIDA DEPARTMENT OF STATE Division of Corporations

February 20, 2008

DEAN A WARRICK 8130 SUMMER PALM CT JACKSONVILLE, FL 32256

SUBJECT: LIFELINE, INC. Ref. Number: W08000009096

We have received your document for LIFELINE, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6993.

Annie Hall Regulatory Specialist II New Filing Section

Letter Number: 708A00010855

**COVER LETTER** 

FILED

2008 FEB 28 AM II: 39

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

SUBJECT:	Myriad, co	•	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: D	ean A Warrick	(Printed or typed)	
	8130 Summer Palm C	, ,	
	Jacksonville, FL 3225	6 , State & Zip	·
	904-316-4210	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:

Myriad, Corp.

# <u>ARTICLE II PRINCIPAL OFFICE</u>

The principal place of business/mailing address is: 8130 Summer Palm CT Jacksonville FL 32256

### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: Any and all business deemed legal by the state of florida

### ARTICLE IV SHARES

The number of shares of stock is:

100

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# INITIAL OFFICERS AND/OR DIRECTORS

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

Dean A Warrick /P,D 8130 Summer Palm CT Jacksonville FL 32256

Debra A Warrick /D 8130 Summer Palm CT Jacksonville FL 32256

Terry J MC Griff /CEO,D,T 8247 Virgo ST Jacksonville FL 32216

Sheila J MC Griff /D,S 8247 Virgo ST Jacksonville FL 32216

# <u>ARTICLE VI REGISTERED AGENT</u>

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: Dean A Warrick 8130 Summer Palm CT Jacksonville FL 32256

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dean A Warrick 8130 Summer Palm CT Jacksonville FL 32256

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

Deur a Varich

Signature/Registered Agent

Date

Deur a Varick

Signature/Incorporator

Date

ECRETARY OF STA