

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : FASTKIT CORPORATE OUTFITS
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT/NON PROFIT CORPORATION

VANCE WILSON, CRNA, PA

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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:

VANCE WILSON, CRNA, PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

587 OAK BAY DR.

OSPREY, FL 34229

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**INDEPENDENTLY CONTRACTED CERTIFIED REGISTERED NURSE ANESTHETIST
PROVIDING ANESTHESIA SERVICES**

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES 1.00 PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

VANCE WILSON- PRESIDENT / DIRECTOR

587 OAK BAY DR.

OSPREY, FL 34229

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ARTICLE VI REGISTERED AGENT

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

VANCE WILSON
587 OAK BAY DR.
OSPREY, FL 34229

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

VANCE WILSON
587 OAK BAY DR.
OSPREY, FL 34229

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

Vance Wilson
Signature/Registered Agent

03-12-08

Date

Vance Wilson
Signature/Incorporator

03-12-08

Date

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