

PI 0 000015618

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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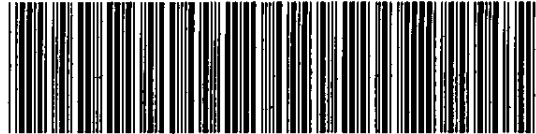
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers FEB 22 2010

COVER LETTER

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

SUBJECT: American Medical Products, Incorporated

(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: Richard E. Hodgkins

Name (Printed or typed)

161 Manresa Road

Address

St Augustine, FL 32084

City, State & Zip

904-669-3342

Daytime Telephone number

rehodgkins@bellsouth.net

E-mail address: (to be used for future annual report notification)

DEPT. OF STATE
TALLAHASSEE, FLORIDA

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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: American Medical Products, Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

Street address: 134 Riberia Street, Suite 103, St Augustine, FL 32084

Mailing address: P O Box 4073, St Augustine, FL 32085-4073

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medical Products Sales and Service

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):

Richard E Hodgkins, 161 Manresa Rd St Augustine, Fl 32084, President & Chief Executive Officer
Bradley A, Ashton, 1880 Derbyshire Rd, Maitland, Fl 32751, Vice President, National Sales Mgr

ARTICLE VI REGISTERED AGENT

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

Richard E. Hodgkins 161 Manresa Road St Augustine, FL 32084

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Richard E. Hodgkins 161 Manresa Road St Augustine, FL 32084

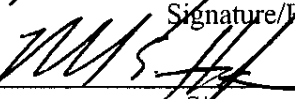
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

2/17/2010

Date



Signature/Incorporator

2/17/2010

Date

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TALLAHASSEE, FLORIDA