

P10000052088

(Requestor's Name)

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(City/State/Zip/Phone #)

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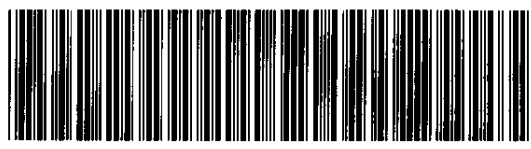
(Business Entity Name)

(Document Number)

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10 JUN 21 PM 2:56
SECRETARY OF STATE
TOLAHASSEE, FL 32310

W1000027894
CP

6-22-10 CR

COVER LETTER

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

SUBJECT: FULCRUM CLINICAL LABORATORIES 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: EDWARD BEHARRY & RYAN CUMMINS
Name (Printed or typed)

2755 GRAPEVINE CREST
Address

OCFEE FL 34761
City, State & Zip

407 394 5085
Daytime Telephone number

edbeha@yahoo.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

10 JUN 21 PM 4:04

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

June 10, 2010

EDWARD BEHARRY & RYAN CUMMINS
2755 GRAPEVINE CREST
OCOE, FL 34761

SUBJECT: FULCRUM CLINICAL LABORATORIES, INC.
Ref. Number: W10000027894

We have received your document for FULCRUM CLINICAL LABORATORIES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6869.

Christine Haney
Senior Clerk
New Filing Section

Letter Number: 910A00014400

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:

FULCRUM CLINICAL LABORATORIES, INC.

ARTICLE II PRINCIPAL OFFICE

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

13650 W COLONIAL DR, STE 170

~~34787 UNIT B9~~, WINTER GARDEN, FL ~~34778~~ 34787

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO DO TESTING ON BODY FLUIDS e.g. blood, urine, for diagnosis.

ARTICLE IV SHARES

The number of shares of stock is: 1000 500/500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

EDWARD BEHARRY 2755 GRAPEVINE CREST, OCOEE FL 34761 - TECH DIRE

RYAN CUMMINS 1666 Grandiflora Ave. Grand Fl. Clermont FL 34711 Operations.

ARTICLE VI REGISTERED AGENT

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

EDWARD BEHARRY
2755 GRAPEVINE CREST
OCOEE FL 34761

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Ryan Cummins 1666 Grandiflora Ave.
Clermont FL 34711

EDWARD BEHARRY 2755 GRAPEVINE CREST OCOEE FL 34761

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

Edward Beharry
Signature/Registered Agent

6/13/10
Date

Edward Beharry / Ryan Cummins
Signature/Incorporator

6/13/10
Date