

P/0000059/10

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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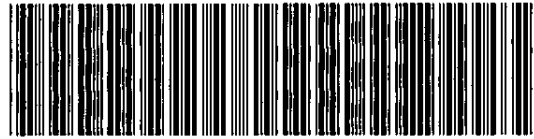
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10 JUL 19 PM 2:29

SECRETARY OF STATE
TALAHASSEE, FLORIDA

PS 7/21/10

COVER LETTER

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

SUBJECT: Diplomat Medical Transportation, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Diplomat Medical Transportation, Inc.

Name (Printed or typed)

5421 - A 15th Street East

Address

Bradenton, Florida 34203

City, State & Zip

(941) 757-0280

Daytime Telephone number

Resendiz21@yahoo.com

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

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:

Diplomat Medical Transportation, Inc.

ARTICLE II PRINCIPAL OFFICE

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

5421-A 15th Street East
Bradenton, FL 34203

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Patient Transportation

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)

Jorge Resendiz - President
5140 Sunnydale Circle West
Sarasota, FL 34233

ARTICLE VI REGISTERED AGENT

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

Jorge Resendiz - President
5140 Sunnydale Circle West
Sarasota, FL 34233

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jorge Resendiz - President
5140 Sunnydale Circle West
Sarasota, FL 34233

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

Date

Signature/Incorporator

Date

10 JUL 19 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED