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FLORIDA PROFIT/NON PROFIT CORPORATION
LEGAL MEDICAL SUPPORT CORP

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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Electronic Filing Menu

Corporate Filing Menu

Help

1 Batch SEP 20 2010

To whom it may concern:

This is to inform that I Edgardo A. Bugin, President of LEGAL MEDICAL SUPPORT CORP will be using the same name to establish a new corporation using the same name; I have no intention in reopening LEGAL MEDICAL SUPPORT CORP. (P01000002548).

Thanks for your help in this matter.

Sincerely

Edgardo A. Bugin

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ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

LEGAL MEDICAL SUPPORT *corp*

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

515 N 44th Avenue, Hollywood, Florida, 33021

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One thousand (1,000) shares common stock, such shares shall be a par value of \$ 1.00 per share.

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:
Edgardo A. Bugin

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ARTICLE V - INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

Edgardo A. Bugin
515 N 44th Ave. Hollywood, Fl 33021

The undersigned incorporator has executed these Articles of Incorporation this
____ 16th ____ day of ____ September ____ 2010 ____.



Signature

ARTICLE VI - DIRECTOR (S)

The name(s) and street address (es) of the director(s) to these Articles of
Incorporation is (are):

Edgardo a. Bugin
515 N 44th Ave. Hollywood, Fl 33021

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT
/REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.


Registered Agent Signature

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