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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : CSH SERVICES, LLC
Account Number : I20070000160
Phone : (800) 494-3124
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TALLAHASSEE, FLORIDA

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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FLORIDA PROFIT/NON PROFIT CORPORATION

Triple C Medical Corp.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

TRIPLE C MEDICAL CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4409 W. GRAY ST UNIT #5

TAMPA, FLORIDA 33609

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is:

DIRECTOR, PRESIDENT, VICE PRESIDENT, SECRETARY, TREASURER

CASEY C CAMERO

4409 W. GRAY ST UNIT #5

TAMPA, FLORIDA 33609

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TALLAHASSEE FLORIDA

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PAGE 2 TRIPLE C MEDICAL CORP.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

CASEY C CAMERO
4409 W. GRAY ST UNIT #5
TAMPA, FLORIDA 33609

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ARTICLE VII INCORPORATOR

The name and street address of the incorporator is:

CASEY C CAMERO
4409 W. GRAY ST UNIT #5
TAMPA, FLORIDA 33609

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.


CASEY C CAMERO / Registered Agent11/17/10
Date
CASEY C CAMERO / Incorporator11/17/10
Date

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