Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000033600 3)))



H140000336003ABCR

To:			
	Division of Corporations		
	Fax Number	: (850)617-6381	
			1
From:			学芸
	Account Name	: BLUMBERG/EXCELSIOR CORPORATE	SERVICÉS,
	Account Number	: 075350000353	
	Phone	: (800)221-2972	
	Fax Number	: (888)692-9256	

FLORIDA PROFIT/NON PROFIT CORPORATION EMDYKYCOL INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

, From:

02/11/2014 09:59 * #435-P.002/003

ARTICLES OF INCORPORATION • In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

-	ME EMDYKYCOL INC). a _c =	
	INCIPAL OFFICE		
Principal street address		Mailing address, if different is:	
6620 GLEN A	ARBOR WAY	6620 GLEN ARBOR WAY	
NAPLES, FL	34119	NAPLES, FL 34119	
		the state of the s	
		age in any lawful act or activity for	
which corpora	ations may be organized.		
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ARTICLE IV SH The number of shares o	ARES 1,000		
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he number of shares o ARTICLE V INI Name and Titl Address	TTAL OFFICERS AND/OR DIRECTOR Ie: Jeffrey A. Lash/Director 18 Brandywine Lane Sandy Hook, CT 06482	Name and Title:Address:	
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Name and	l Title:	Name and Title:		
Address		Address:		
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			<u> </u>	
ARTICLE VI	REGISTERED AGENT		77.	
	orida street address (P.O. Box NOT acceptable)	of the registered agent is:		
Name:	Jeffrey A. Lash			
Address:	6620 Gien Arbor Way			
	Naples, FL 34119			
ARTICLE VII	INCORPORATOR dress of the Incorporator is:			
Name:	Jeffrey A. Lash	_		
Address:	18 Brandywine Lane			
	Sandy Hook, CT 06482			
Having been nam this certificate, I at	ed as registered agent, to accept service of proc m familiar with sing accept the appointment as	ess for the above stated corporati registered agent and agree to act t	on at the place designated in in this capacity	
<u></u>	Required Signature/Registered Agent		Date	
i submit this docu document to the D	ument and affirm that the facts stated herein a eportment of State constitutes a third degree fel	re true. I am aware that the falso ony as provided for in s.817.155,	e information submitted in a F.S.	
	Required Signature incorporator		Date	