

## Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet**P15000014756**

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Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
CLINICAL RESEARCH WEST COAST INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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2/13/12

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

H15000036929

**ARTICLE I NAME:** The name of the corporation is:

Clinical Research West Coast INC

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

3660 Central Ave Unit 9  
FORT MYERS FL 33901

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2015 FEB 12 PM 1:48

FILED

**ARTICLE III SHARES:** The number of shares of stock is:

100

**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

CHRIS RODRIGUEZ MARTINEZ P  
MAYLEIDYS SABINA MENDEZ VP  
DYHAIVIS SAAVEDRA CAMERO VP

**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

MAYLEIDYS SABINA MENDEZ  
3660 Central ave. UNIT 9  
FORT MYERS FL 33901

**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:

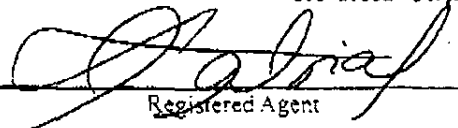
MAYLEIDYS SABINA MENDEZ  
3660 Central ave. UNIT 9  
FORT MYERS FL 33901

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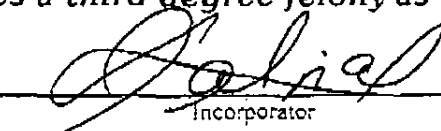
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**Required Signatures:**

*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*

  
\_\_\_\_\_  
Registered Agent Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

  
\_\_\_\_\_  
Incorporator Date

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