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(Re	equestor's Name)			
(Ac	ldress)			
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(Ci	ty/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
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SECRETARY OF STARE

COVER LETTER

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

GUZAN SUBJECT:	ANESTHESIA STAFFING, INC.				
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)					
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d a check for:		
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status		
	ADDITIONAL COPY REC		PY REQUIRED		
FROM:	ÆS GUZAN Nam	e (Printed or typed)			
575	3 HWY 85 NORTH # 5899				
CDI	ESTVIEW , FL 32536	Address			
	·	State & Zip			
330-	442-3547				
	Daytime 1	elephone number			
	E-mail address: (to be use	d for future amual report :	otification)		

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)

CLE II PRINC	CIPAL OFFICE		
	Principal street address	Mailing add	lress, if different is:
HWY 85 NORT	•		
STVIEW, FL 325	36		
			
CLE III PURP	OSE the corporation is organized is:	HESIA STAFFING	
mpose for which	the corporation is organized is.	 	
		•	
		· · · · · · · · · · · · · · · · · · ·	-
C7 E 817 C87 4 B	ro.		
CLE IV SHAR	<u>ES</u> 60,000 stock is:		
CLE IV SHAR umber of shares of	ES 60,000 fstock is:		
umber of shares of	stock is:		2011 SE
umber of shares of	stock is: AL OFFICERS AND/OR DIRECTORS		2010 M SECIA TALLA
umber of shares of	stock is: AL OFFICERS AND/OR DIRECTORS JAMES GUZAN PRESIDENT e:	Name and Title:	2018 MAY SECKEJA TALLAHA
umber of shares of	AL OFFICERS AND/OR DIRECTORS JAMES GUZAN PRESIDENT 6: 5753 HUVY 85 NOPTH # 5899	Name and Title:	SS -L
umber of shares of CLE V INITL Name and Titl	stock is: AL OFFICERS AND/OR DIRECTORS JAMES GUZAN PRESIDENT e:	Name and Title:	SS -L
umber of shares of CLE V INITL Name and Titl	Stock is: AL OFFICERS AND/OR DIRECTORS JAMES GUZAN PRESIDENT 5753 HWY 85 NORTH # 5899	Name and Title:	SS -L
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umber of shares of CLE V INITL Name and Titl Address	AL OFFICERS AND/OR DIRECTORS JAMES GUZAN PRESIDENT 5753 HWY 85 NORTH # 5899 CRESTVIEW, FL 32536	Name and Title:Address:	-L AR 9 38 AR OF STALE SSEE, FLORIDA
number of shares of CLE V INITL Name and Titl Address Name and Title	Stock is: AL OFFICERS AND/OR DIRECTORS JAMES GUZAN PRESIDENT 5753 HWY 85 NORTH # 5899	Name and Title: Address: Name and Title:	-L AR 9 38 AR OF STALE SSEE, FLORIDA
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number of shares of CLE V INITL Name and Titl Address Name and Title Address	AL OFFICERS AND/OR DIRECTORS JAMES GUZAN PRESIDENT 5753 HWY 85 NORTH # 5899 CRESTVIEW, FL 32536	Name and Title: Address: Name and Title: Address:	-4 AP → 30 AR → Of STALE SSEE, FLORIDA
Name and Title Address Name and Title	AL OFFICERS AND/OR DIRECTORS E: JAMES GUZAN PRESIDENT 5753 HWY 85 NORTH # 5899 CRESTVIEW, FL 32536	Name and Title: Address: Name and Title: Address: Name and Title:	-4 AP → 30 AR → Of STALE SSEE, FLORIDA
number of shares of CLE V INITL Name and Titl Address Name and Title Address	AL OFFICERS AND/OR DIRECTORS e: JAMES GUZAN PRESIDENT 5753 HWY 85 NORTH # 5899 CRESTVIEW, FL 32536	Name and Title: Address: Name and Title: Address: Name and Title:	-4 AP → 30 AR → Of STALE SSEE, FLORIDA

Name an	d Title:	Name and Title:
Address		Address:
		
ARTICLE VI The name and Fi	<u>REGISTERED AGENT</u> <u>lorida street address</u> (P.O. Box NOT acceptable	e) of the registered agent is:
Name:	JAMES GUZAN	, ,
	5753 HWY 85 NORTH # 5899	_
Address:	CRESTVIEW, FL 32536	
		
ARTICLE VII	INCORPORATOR	
	ddress of the Incorporator is:	
	JAMES GUZAN	
Name:	5753 HWY 85 NORTH # 5899	
Address:	CRESTVIEW, FL 32536	
	CREST VIEW, PL 32330	 .
ADTICLE WIL	EEECTIVE DATE.	
	EFFECTIVE DATE: Tother than the date of filing:	(OPTIONAL)
(If an effective of filing.)	late is listed, the date must be specific and ca	nnot be more than five days prior or 90 days after the
	e inserted in this block does not meet the applications: ffective date on the Department of State's recore	ble statutory filing requirements, this date will not be listed as ds.
		cess for the above stated corporation at the place designated in registered agent and agree to act in this capacity
71	$\mathcal{O}_{\mathcal{I}_{I}}}}}}}}}}$	
x Jan	u.c. Hom	× 01 MAY 2018
1	Required Signature/Registered Agent	Date
	cument and affirm that the facts stated herein Department of State constitutes a third degree f	are true. I am aware that the false information submitted in a
	Expanded by Sime opinimies a min a degree f	
× & con	re C Som	x01 mpy 2.018
Requ	ired Signature/Incorporator/	Date