

**19500022895**  
**TRANSMITTAL LETTER**

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

400001425454  
-03/09/95--01073--014  
\*\*\*\*131.25 \*\*\*\*131.25

SUBJECT: FIRST MED, INC  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check  
for :

☐ \$70.00    ☐ \$78.75    ☐ \$122.50    ☒ \$131.25

FROM: WILLIAM SCOTT GARRETT  
Name (printed or typed)  
1106 ELMINE AVE  
Address  
WINTER SPRINGS, FL 32708  
City, State & Zip  
407-839-7098  
Daytime telephone number

SEP 22 AM 10:50

FILED  
DIVISION OF STATE

W95-54123

AG 7  
SOG

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

March 10, 1995

WILLIAM SCOTT GARRETT  
1106 ERMINE AVE.  
WINTER SPRINGS, FL 32708

SUBJECT: FIRST MED, INC  
Ref. Number: W95000005423

We have received your document for FIRST MED, INC and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6931.

Steven Godfrey  
Corporate Specialist

Letter Number: 195A0001093.

## 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:

~~FIRST MED, INC~~ WSC  
FIRST MEDICAL, INC

COPIES MADE

### ARTICLE II PRINCIPAL OFFICE

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

1106 ELMINE AVE  
WINTER SPRINGS, FL 32708

### ARTICLE III SHARES

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

1000 SHARES

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

WILLIAM SCOTT GAMETT  
1106 ELMINE AVE  
WINTER SPRINGS, FL 32708

**ARTICLE V INCORPORATOR(S)**

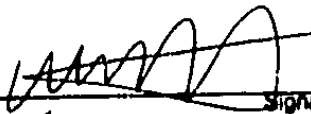
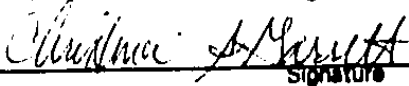
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

WILLIAM SCOTT GARNETT (PRESIDENT)  
1106 ERMINE AVE  
WINTER SPRINGS, FL 32708

CHRISTINA S GARNETT (VICE PRESIDENT)

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

6 MARCH day of MARCH, 1995.

  
\_\_\_\_\_  
Signature  
  
\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Signature

Articles of Incorporation  
Filing Fee - \$35

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: FIRST MEDICAL, INC  
~~FIRST MED, INC~~ WSC


2. The name and address of the registered agent and office is:

WILLIAM SCOTT GMAETT  
(Name)

1106 ELMINE AVE  
(P.O. Box not acceptable)

WINTER SPRINGS FL 32708  
(City/State/Zip)

*Having been named as registered agent and to accept service of process for the above stated corporation at the 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Signature)



DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL

SEP 22 AM 10:50  
RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL