

D9500037733

FILED
95 MAY 10 AM 9:32
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

400001402934
-05/10/95--01004--004
*****78.75 *****78.75

SUBJECT: MED TRAN SCHOOL AND TRANSCRIPTION SERVICE, INC.

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

\$78.75 Filing Fee & Certificate

FROM: Joanne Griffin
8121 Malibu Drive
Pensacola, Fl. 32514
904 478-4334

NOTE: Please find enclosed the original and one copy of the
articles

D. BROWN MAY 12 1995

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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:

MED TRAN SCHOOL AND TRANSCRIPTION SERVICE, INC.

ARTICLE II PRINCIPAL OFFICE

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

8121 Malibu Drive
Pensacola, Fl. 32514

ARTICLE III SHARES

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

One hundred (100)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Joanne Griffin
8121 Malibu Drive
Pensacola, Fl. 32514

ARTICLE V INCORPORATOR(S)

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

JOANNE GRIFFIN
8121 MALIBU DRIVE
PENSACOLA, FL. 32514

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

5th day of May, 1995.

Joanne Griffin

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

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PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: MED TRAN SCHOOL AND
TRANSCRIPTION SERVICE, INC.
2. The name and address of the registered agent and office
is:

Joanne Griffin

8121 Malibu Drive

Pensacola, Fl. 32514

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.

Joanne Griffin

5-5-95

Document Number Only

P95000037733

Requestor's Name

Address

City State Zip Phone

CORPORATION(S) NAME

Mail this postcard to people and businesses that send you mail

Please send mail to new address beginning: 06/01/96

MED TRAN SCHOOL AND TRANSCRIPT

My Name (Last name, first name, middle initial)

GRiffin JOANNE

OLD Complete Street Address or PO Box or Rural Route and RR Box

600 University Office Bldg

City or Post Office

Pensacola

State

ZIP or ZIP+4 Code

FL 32504

NEW Complete Street Address or PO Box or Rural Route or J RR Box

744 E. Burgess Rd

City or Post Office

Pensacola C-101

State

ZIP or ZIP+4 Code

FL 32504

NEW Telephone Number (Optional)

904 857 0087

Account Number (if applicable)

Signature

Joanne Griffin

Today's Date: Month Day Year

05/22/96

ge of R.A.

() Call When Ready

() Walk In

() Mail Out

() Call if Problem

() Will Wait

() After 4:30

() Pick Up

Name
Availability
Document Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

CR2E031 (1-89)

Amend
address
chg

5/24