

P95000050556

TRANSMITTAL LETTER

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

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

SUBJECT: MedArs Management Services 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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM: Kevin M. Sakuta
Name (printed or typed)
1193 Enterprise Drive, Unit A-3
Address
Port Charlotte, FL 33953
City, State & Zip
(813) 743-7934
Daytime Telephone number

2095-12867

Dmc
6/23/95

6/2

FILED
JUN 28 1995
TALLAHASSEE, FLORIDA

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



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

June 23, 1995

KEVIN M. SAKUTA
1193 ENTERPRISE DRIVE
UNIT A-3
PORT CHARLOTTE, FL 33953

SUBJECT: MEDARS MANAGEMENT SERVICES INC.
Ref. Number: W95000012867

We have received your document for MEDARS MANAGEMENT SERVICES INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent and registered office listed in your articles of incorporation must be consistent throughout the document.

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) 487-6923.

Doris McDuffie
Corporate Specialist Supervisor

Letter Number: 895A00030932

ARTICLES OF INCORPORATION

FILED

25 JUN 88 PM 12:42

TALLAHASSEE, FLORIDA

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:

MedArs Management Services Inc.

ARTICLE II PRINCIPAL OFFICE

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

1193 Enterprise Dr., Unit A-3
Port Charlotte, FL 33953

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Kevin M. Sakuta
1193 Enterprise Dr., A-3
Port Charlotte, FL 33953

ARTICLE V INCORPORATOR(S)

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

Kevin M. Sakuta (400)
3494 Brooklyn Ave.
Port Charlotte, FL 33952

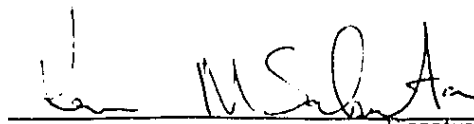
J. Phillip Turner (400)
1012 Webster St.
Port Charlotte, FL 33948

Willie Sakuta (100)
3494 Brooklyn Ave.
Port Charlotte, FL 33952

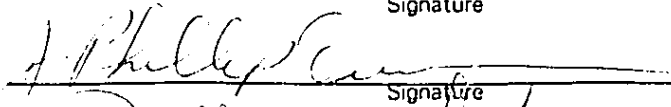
Patricia Damico (100)
1631 Abalom St.
Port Charlotte, FL 33980

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

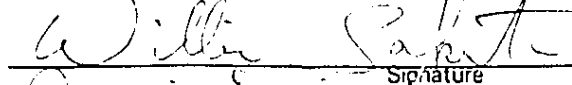
7th day of June, 1995.




Signature



Signature



Signature



Signature

Articles of Incorporation
Filing Fee - \$35

FILED
95 JUN 28 PM 12
TALLAHASSEE, FLA

**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: MedArs Management Services Inc.

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

Kevin M. Sakuta

(Name)

1193 Enterprise Dr., Unit A-3

(P.O. Box not acceptable)

Port Charlotte, FL 33953

(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

Kevin M. Sakuta
(Signature)

6/7/95
(Date)