

P96000021834
TRANSMITTAL LETTER

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

SUBJECT: MEDICAL CREDENTIALS VERIFICATION, INC.
 (Proposed corporate name - must include suffix)

500001736125
 -03/07/96--01089--010
 ****131.25 ****131.25

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

Please return the photocopy to me with the filing date stamped on it.

FROM:

Daina R. Jones

Name (printed or typed)

26011 Druid Hills Road

Address

Sacramento, FL 32776

City, State & Zip

904-383-5249

Daytime Telephone Number

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

96 MAR - 7 PM 2:02

FILED

SAS
 3/11/96

Articles of Incorporation

1. The name of the corporation shall be:
Medient Oncobutalix Verification, Inc.
2. The principal place of business and mailing address of the corporation is:
26011 Druid Hills Road
Sorrento, FL 32776
3. The corporation shall have the authority to issue 100 shares of stock.
4. The registered agent of the corporation is Branch K. Sleeter and the registered street address is 2660 San Juan Street, Deland, Florida 32724.
5. The initial Board of Directors shall have 2 member(s) whose name(s) and address(es) is/are as follows: Daina R. Jones, 26011 Druid Hills Road, Sorrento, FL 32776
Branch K. Sleeter, 2660 San Juan Street, Deland, FL 32724

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is Daina R. Jones whose street address is 26011 Druid Hills Road, Sorrento, FL 32776

Dated March 4, 1996

Daina R. Jones
Incorporator

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 am familiar with and accept the obligations of my position as registered agent.

Dated March 4, 1996

Branch K. Sleeter
Registered Agent

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TALLAHASSEE, FLORIDA