

P96000048088
TRANSMITTAL LETTER

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

SUBJECT: GULFCOAST TRANSCRIPTION OF FLORIDA, INC.
(Proposed corporate name - must include suffix)

400001849774
-06/04/96--01081--011
*****78.75 *****78.75

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: Southwest Professional Services of Florida, Inc.
Name (printed or typed)

13611 McGregor Blvd
Address

Fort Myers, FL 33919
City, State & Zip

941-481-4444
Daytime Telephone number

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

96 JUN 3 AM 10:18

FILED

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

GB 6/6/96

FILED

96 JUN -3 AM 10:19

NOTES: ALL INFORMATION
CONTAINED HEREIN IS UNCLASSIFIED

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:

GULFCOAST TRANSCRIPTION OF FLORIDA, INC.

ARTICLE II PRINCIPAL OFFICE

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

9751 St Paul Rd
No. Fort Myers, FL 33917

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:

Southwest Professional Services of Fort Myers, Inc.
13611 McGregor Blvd
Fort Myers, FL 33919

ARTICLE V INCORPORATOR(S)

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

Janet Simmons
9751 St Paul Rd
No. Fort Myers, Fl 33917

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

29 day of May, 19 96.

Janet A. Simmons
Signature/Title President

Signature/Title

Signature/Title

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 807.0501 or 817.0501, 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: GULFCOAST TRANSCRIPTION OF FLORIDA, INC.

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

Southwest Professional Services of Fort Myers, Inc.

(Name)

13611 McGregor Blvd

(P.O. Box not acceptable)

Fort Myers, Fl 33919

(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.

Southwest Professional Services of
Fort Myers, Inc.


(Signature)