196000085235 THANSMITTAL LETTER

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

700001973117--6 -10/15/96--01005--018 \*\*\*\*\*\*70.00 \*\*\*\*\*\*70.00

	EDICAL STAFFING oposed corporate na	G, ING. ame - must include su	ffix)		
Enclosed is an original a for : x \$70.00 Filing Fee	nd one (1) copy \$78.75 Filing Fee & Certificate	of the articles of i \$122.50 Filing Fee & Certified Copy	ncorporation ar  \$131.25  Filing Fee, Certified Copy & Certificate	nd a check	
FROM:	Name (pr	L. Hezlitt inted or typed) 8th Avenue		96 OCT 1	
	Vero Beac	Address h, F1 32967 State & Zip		15 M 8: 43	
	1-561-388-	1491 elephone number		P	.:

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



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:

AERO MEDICAL STAFFING, INC.

## ARTICLE II PRINCIPAL OFFICE

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

8516 98th Avenue Vero Beach, Fl 32967

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500 shares of stock at \$ 1.00 par value.

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Jeanette L. Hezlitt 8516 98th Avenue Vero Beach, Fl 32967

## ARTICLE V INCORPORATOR(S)

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

Jeanette L. Hezlitt

8516 98th Ave., Vero Beach, Fl 32967

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

Articles of Incorporation Filing Fee - \$

# 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: AERO MEDICAL STAFFING, INC.

To	S = 57
2. The name and address of the registered agent and office is:	OCT 15
(Name)	ြွတ္ 🖫
8516 98th Avenue	8: 43
(P.O. Box not acceptable)	
Vero Beach, Fl 32967	
(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 act to comply with the provisions of all statutes relating to the proper and complete mance of my duties, and I am familiar with and accept the obligations of my post registered agent.    Aut.   O / O / O / O / O / O / O / O / O / O	ne cept agree perfor- sition