

TRANSMITTAL LETTER

P9600001 00145

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

300002024449--8
-12/10/96--01055--012
*****70.00 *****70.00

SUBJECT: J+K Medical, 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 ☐ \$78.75 ☐ \$122.50 ☐ \$131.25

FROM: James J. Wonsick
Name (printed or typed)

1800 Huntington Road
Address

Nikeville, AL 32578
City, State & Zip

904-678-4479
Daytime Telephone number

James Wonsick GAVE
AUTHORIZATION BY PHONE TO
CORRECT Deleto DBA Name
DATE 12/11/96
DOC. EXAM CP

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 DEC -9 PM 3:24

gja/1/96

ARTICLES OF INCORPORATION

OF

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 DEC -9 PM 3:24

J + K Medical, INC.

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:

J + K Medical, INC.

ARTICLE II PRINCIPAL OFFICE

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

1021 K John Sims Pkwy
Niceville, FL 32578

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:

James J. Wonsick, SR.
1820 Huntington Road
Niceville, FL 32578

ARTICLE V INCORPORATOR(S)

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


James J. Wonsick, SR.

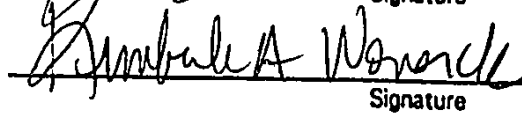
Kimberlee A. Wonsick

1820 Huntington Road
Niceville, FL 32578

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

5th day of December, 1996.

 12/5/96
Signature

 12/5/96
Signature

Signature

Articles of Incorporation
Filing Fee - \$35

**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: J & K Medical, INC.

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

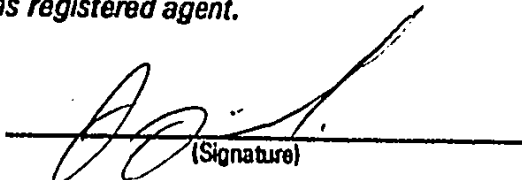
James J. Wonsick, SR.
(Name)

1820 Huntington Road
(P.O. Box not acceptable)

Niceville FL 32578
(City/State/Zip)

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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.


(Signature)

12/5/96