TRANSMITTAL LETTER

P96000103567

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

FILED
96 DEC 26
SECRETARY OF STATE
DIVISION OF CORPORATIONS

500002046405--8
-01/06/97--01019--003
*****78.50 *****78.50

SUBJECT: MEDICAL FAX PLACEMENT, INC.
(Proposed corporate name - must include suffix)

FF 70.00
Cert 8.50
78.50

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

Additional Copy Required

FROM: MONTY G. BIRDSEY
Name (printed or typed)

754 DUNLAP CIRCLE
Address

WINTER SPRINGS, FL. 32708
City, State & Zip

(407) 359-8800
Daytime Telephone number

W96-26783

ST
12/27

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

12-21-96

Ms. SHARON TALA,

I forgot to enclose my check for $78.50 for occ. fin. and cert.

Paperwork should have been received by Division of Corps. by 3:00PM EST 12-20-96 via USPS Express Mail # EI238205044US.

Hopefully you can match my check and paperwork ASAP as to expedite the return of our corporations papers needed to obtain Occupational Licensure.

Thank you for your assistance and Happy Holidays.

Sincerely,

Dorothy J. Riley

Medical Fax Placement, Inc.

W96-26783

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.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 DEC 26 AM 8:55

ARTICLE I NAME

The name of the corporation shall be:

MEDICAL FAX PLACEMENT, INC.

ARTICLE II PRINCIPAL OFFICE

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

754 DUNLAP CIRCLE
WINTER SPRINGS, FL. 32708

ARTICLE III SHARES

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

ONE THOUSAND (1,000) SHARES AT FIVE DOLLARS ($5.00) PER SHARE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MONTY G. BIRDSEY
754 DUNLAP CIRCLE
WINTER SPRINGS, FL. 32708

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

MONTY G. BIRDSEY
754 DUNLAP CIRCLE
WINTER SPRINGS, FL. 32708

BONNIE K. PHILLIPS
754 DUNLAP CIRCLE
WINTER SPRINGS, FL. 32708

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

18 day of December, 19 96.

Monty G. Birdsey
Signature

Bonnie K. Phillips
Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: MEDICAL FAX PLACEMENT, INC.

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

MONTY G. BIRDSEY
(NAME)

754 DUNLAP CIRCLE
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

WINTER SPRINGS, FL. 32708
(CITY/STATE/ZIP)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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.

Monty G Birdsey
(SIGNATURE)

12-18-96
(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314