

P970000006342

TRANSMITTAL LETTER

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

SUBJECT: QUALITY PHYSICIAN SERVICES, INC.  
(Proposed corporate name - must include suffix)

800002060258--9  
-01/16/97--01054--003  
\*\*\*\*\*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:

MELANIE J. HELMUTH

Name (printed or typed)

71 LAKE SHORE DRIVE

Address

PALM HARBOR, FL 34684

City, State & Zip

(813) 937-4908

Daytime Telephone number

JAN 22

BSB

FILED  
97 JAN 16 PM 3:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**FILED**

97 JAN 16 PM 3:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## **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:      QUALITY PHYSICIAN SERVICES, INC.

### **ARTICLE II    PRINCIPAL OFFICE**

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

71 LAKE SHORE DRIVE  
PALM HARBOR, FL 34684

### **ARTICLE III    SHARES**

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

FIVE-HUNDRED (500) SHARES  
COMMON STOCK

### **ARTICLE IV    INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

MELANIE J. HELMUTH  
71 LAKE SHORE DRIVE  
PALM HARBOR, FL 34684

**ARTICLE V INCORPORATOR(S)**

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

MELANIE J. HELMUTH  
71 LAKE SHORE DRIVE  
PALM HARBOR, FL 34684

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

13TH day of JANUARY, 19 97.

  
\_\_\_\_\_  
Signature  
MELANIE J. HELMUTH

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

## 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: QUALITY PHYSICIAN SERVICES, INC.

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

MELANIE J. HELMUTH

(Name)

71 LAKE SHORE DRIVE

(P.O. Box not acceptable)

PALM HARBOR, FL 34684

(City/State/Zip)

**FILED**  
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TALLAHASSEE, FLORIDA

*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.*

Melanie J. Helmuth  
(Signature)

JANUARY 13, 1997

(Date)