# TRANSMITTAL LETTER 1000000158

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

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SUBJECT:	CAMPBELL SUPPORT SERVICES INC (proposed corporate name)	· <del>·······</del>
Enclosed is an for \$ 198.5	original and one (1) copy of the articles of incorporation and out $\frac{\partial \mathcal{D}}{\partial \mathcal{D}}$	r check
EDOM	MICHELE E. CAMPBELL	OIN ISICH CH
FROM:	Name (printed or typed)	9 77
	3317 RIVER ESTATES DRIVE	PH PERSON
	Address	PH 2: 24
	WIMAUMA, FLORIDA 33598	16,15 2: 24
	City, State, & Zip	
•	(813 ) 634-2745	
	Telephone Number	

Note: Please provide the original and one copy of the Articles.



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 30, 1997

MICHELE E. CAMPBELL 3317 RIVER ESTATES DRIVE WIMAUMA, FL 33598

The name CAMPBELL SUPPORT SERVICES, INC. has been reserved for 120 days beginning June 30, 1997. The reservation number is R97000003169 and this reservation is **NONRENEWABLE**.

A reservation is not a grant of authority to use the name. It is only a withholding of a name from its availability for use by another. When the proposed document is submitted, the name will **AGAIN** be checked against the records of the Division and if still no conflict exists and all other requirements are fulfilled, the reserved name shall be filed as the entity name.

The Division of Corporations is a ministerial filing office and may not render any legal advice. The Division does not adjudicate the legality of any corporate name or arbitrate disputes between entities. You may wish to review other laws such as common law rights, including rights to a trade name; United States Code, Federal Trademark Act, Section 1051 (Lantham Act); Chapter 495, Florida Statutes, Registration of Trademarks and Service Marks (Florida Trademark Act); and Section 865.09, Florida Statutes (Fictitious Name Act).

If someone else submits the document for filling, it must have a copy of this letter attached.

Should you have any questions regarding this matter, please telephone (904) 488-9000, the Name Availability Section

Marie Bartlett

Letter number: 597A00034228

## ARTICLES OF INCORPORATION

**QE** 



CAMPBELL SUPPORT SERVICES, 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:

CAMPBELL SUPPORT SERVICES, INC.

### ARTICLE II PRINCIPAL OFFICE

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

3317 RIVER ESTATES DRIVE WIMAUMA, FLORIDA 33598 HILLSBOROUGH COUNTY

#### ARTICLE III CAPITAL STOCK

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

1,000 SHARES WITH A PAR VALUE OF \$5.00 PER SHARE

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MICHELE E. CAMPBELL 3317 RIVER ESTATES DRIVE WIMAUMA, FLORIDA 33598

#### ARTICLE V INCORPORATOR(S)

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

PRESIDENT
MICHELE E. CAMPBELL
3317 RIVER ESTATES DRIVE
WIMAUMA, FLORIDA 33598

Purpose of Corporation: To provide transcription services to medical doctors and psychiatrists, as well as attorneys.

The undersigned incorporator(	s) has(have) executed these Articles of Incorporation this
day of _	, 19
•	Signature
	Signature
,	Signature

Articles of Incorporation Filing Fee - \$35

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 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.	1. The name of the corporation is: CAMPBELL SUPPORT SERVICES, INC.			
2.	The name and address of the registered agent and office is:	SOLONE SEL		
	MICHELE E. CAMPBELL	's Calle		
	(NAME)	PH 2: 2		
	3317 RIVER ESTATES DRIVE	5 %		
	(P.O. BOX <u>NOT</u> ACCEPTABLE)	<del>.</del>		
	WIMAUMA, FLORIDA 33598			
	(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.

SIGNATURE Michele E. Compall
INCORPORATOR / REGISTERED AGENT
DATE July 7, 1991

REGISTERED AGENT FILING FEÉ: \$35.00