P97000068317

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

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SUBJECT:	MEDICAL	DIRECT CORPORATION	ON					
	(Proposed corporate name - must include suffix)							
			,					
Enclosed is an	original and o	ne(1) copy of the artic	cles of incorporation and a	check	for :			
☑ \$70 Filing		□ \$78.75 Filing Fee & Certificate	S122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate				
			ADDITIONAL C	ADDITIONAL COPY RE				
FI	ROM: <u>Geor</u>	ge P. Arthur Jr.	(Printed or typed)					
		1 danc	(i limited or typed)					
22722 Vistawood Way					AUG	- 7 19	9 <u>7.</u>	
Address					·····	SEC: TALLA	97 AUG	
Boca Raton, FL. 33428 City, State & Zip							<u> </u>	
	іу, ѕшіє α Ζір			SEE. FL	-6 PH (ILED		
		561-394-0803 Daytim	e Telephone number	-7		TATE	PH 3: 07	

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

FILED

ARTICLES OF INCORPORATION

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The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

SECHLANASSEE FLORIDA

ARTICLE I

The name of the corporation shall be:

MEDICAL DIRECT CORPORATION

ARTICLE II PRINCIPAL OFFICE

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

22722 Vistawood Way Boca Raton, FL. 33428

ARTICLE III SHARES

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

100,000

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

George P. Arthur Jr. 22722 Vistawood Way Boca Raton, FL. 33428

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

George P. Arthur Jr. 22722 Vistawood Way Boca Raton, FL. 33428

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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/Registered Agent Date