Pan O Propred 8201

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

SUBJECT: ACC	CURATE MEDICAL LEGAL (Proposed co	CONSULTING, INC	
Enclosed is an original	and one(1) copy of the articles		MILLIE 2:3 7 1 0:3 0 -03/08/37-01110005 ****122.50
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	S122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate
	VIORU TO THE	ADDITIONAL CO	PY REQUIRED 9
FROM: _	MISTY K. PARKER Name (Printed or typed)		P-8 AR
	3108 PALM PLACE A MARGATE, FL 3306	ddress	AMID: 08 REF. FLORIDA
	City, State & Zip (954) 984 - 4574		
-	Daytime Te	lephone number	

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

FILED

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

ACCURATE MEDICAL LEGAL CONSULTING INC.

PRINCIPAL OFFICE

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

3108 PALM PLACE

FL 33063 MARGATE,

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.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

MISTY K. PARKER

3108 PLAM PLACE

MARGATE, FL 333063

ARTICLE V INCORPORATOR

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

MISTY K. PARKER

3108 PALM PLACE MARGATE, FL 33063

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 abligations of my position as registered agent

Signature/Registered Agent