1791 OTHERSTORED OT P

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 MEDICAL SUBJECT: (Proposed corporate name - must include suffix) -12/09/97--01032--008 *****78.75 *****78.75 Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$131.25 □\$122.50 **⊠** \$78.75 □ \$70.00 Filing Fee, Filing Fee Filing Fee Filing Fee Certified Copy & Certificate & Certified Copy & Certificate ADDITIONAL COPY REQUIRED KENNY FROM: LEIGH Name (Printed or typed) 732 DEWBERRY DRIVE City, State & Zip

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

Daytime Telephone number

(904) 287-3194

ARTICLES OF INCORPORATION

[] the Florida

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

<u>NAME</u>
corporation sha

MEDICAL CYBER SERVICES, INC

	MEDICAL CYBER SERVICES, INC.
ARTICLE II PRINCIPAL O	FFICE .
The principal place of business and ma	ailing address of this corporation shall be:
dag F design Dr	> P.O. Box 600011
732 Dewberry Dr. Jax, FL 32259	Jax, FL 32260-0011
ARTICLE III SHARES	the state of the boys outstanding at any one time is
The number of shares of stock that the	s corporation is authorized to have outstanding at any one time is:
1,000 shares	
	SISTERED AGENT AND STREET ADDRESS
The name and Florida street address of	f the initial registered agent are:
LEIGH E. KENNY	
732 Dewberry Dr.	, Jax, FL 32259
ARTICLE V INCORPORAT	
The name and address of the incorp	orator to these Articles of Incorporation are:
LEIGH E. KENNY	
732 Dewberry Dr.	
Jax, FL 3,2259	
Leide E. Henry Signature/Incorporator	Dec. 4, 1997
Signature/incorporator	
(An additional	article must be added if an effective date is requested.)
certificate I hereby accept the appointment	to accept service of process for the above stated corporation at the place designated in this tas registered agent and agree to act in this capacity. I further agree to comply with the roper and complete performance of my duties, and I am familiar with and accept the nt
Daid & Konne	Dec. 4, 1997
Signature/Registered Agent	