# Parchansmittal Letter 377

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

SUBJECT: AMERICAN ACADEMY OF MEDICAL LEGAL CONSULTANTS, INC. (Proposed corporate name - must include suffix)				
	(Proposed co	orporate name - must includ	le suffix) 30000243 -02/06/38 *****78.7	:3733—-8 01065005 ?5 *****78.75
Enclosed is an original a	and one(1) copy of the article	s 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	·
ADDITIONAL COPY RI				
FROM:	STUARI Name (Pr	A. WESTON inted or typed)	·	
_	1000 CHA	ATHAM COURT ddress		er t
SAFETY HAPPOR, FL 34695  City, State & Zip  887  887  887  Ol3-538-4161  Daytime Telephone number				
Daytime Telephone number				
			COPIDA	E B 17:51
			2/9/98	-tun
NOT	TE: Please provide the ori	ginal and one copy of	the articles.	

# ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

The name of the corporation shall be:

AMERICAN ACADEMY OF MEDICALLEGAL CONSULTANTS, INC.

## ARTICLE II PRINCIPAL OFFICE

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

5553 WALNUT CIRCLE EAST WEST BLOOMFIELD, MICHIBAN 48322

### ARTICLE III SHARES

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

100

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

STUART A. WESTON 1000 CHATHAM COURT

SAFETY HARBOR, FL 34695 NCORPORATOR

ARTICLE V INCORPORATOR

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

STUART A. WESTON

1000 CHATHAM COURT

SAFETY HARBOR, FL 34695

Signature/Incorporator

2-2-98

Date

(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

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