

P 98000037614

TRANSMITTAL LETTER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 APR 22 AM 9:44

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

SUBJECT: Med Review Analysis Inc.
(Proposed corporate name - must include suffix)

900002496359--8
-04/22/98--01042--004
*****70.00 *****70.00

Enclosed is an original and one(1) copy of the articles 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 REQUIRED

FROM: Colleen M. Sharkey
Name (Printed or typed)

598 Coral Glen Loop #302
Address

Altamonte Springs, FL 32714
City, State & Zip

407-297-9703
Daytime Telephone number

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

WS
4/27

MedReview Analysis Inc.

Articles of Incorporation

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Article I:

The name of the corporation shall be **MedReview Analysis Inc.**

Article II:

The principle place of business and mailing address of this corporation shall be: **598 Coral Glen Loop, #302, Altamonte Springs, FL 32714**

Article III:

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: **1,000.**

Article IV:

The name and Florida street address of the initial registered agent is:
Colleen M. Sharkey
598 Coral Glen Loop #302
Altamonte Springs, FL 32714

Article V:

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

Colleen M. Sharkey
598 Coral Glen Loop #302
Altamonte Springs, FL 32714

Article VI: ByLaws

The Incorporators reserve the right of shareholders to adopt initial bylaws.

Colleen Sharkey
Colleen M. Sharkey - Incorporator

4-20-98
Date

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.

Colleen Sharkey
Colleen M. Sharkey - Registered Agent

4-20-98
Date

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 APR 22 AM 9:45