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## FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

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TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC.

ACCT#: 071001002335

CONTACT: LIDIA FERNANDEZ PHONE: (305) 599-0839

FAX #: (305)716-0346

NAME: AMC AMBULANCE SERVICE INC. AUDIT NUMBER..... H98000010455

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS.. 0

PAGES..... 3

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ne 6/4/98

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### ARTICLES OF INCORPORATION OF

98 JUN -4 PM 2: 44

SECRETARY OF STATE TALLAHASSEE, FLORIDA

AMC AMBULANCE SERVICE INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

AMC AMBULANCE SERVICE INC.

The principal place of business of this corporation shall be:
6605 N.W. 74 Ave., Miami, Fl. 33166

#### ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

#### ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time

1000 shares at no par value.

#### ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

#### ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s). If any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

RAUL MEDINA JR. 6605 N.W. 74 Ave., Miami, Fl. 33166

PREPARED BY: MICHAEL I. SANTUCCI, ESQ. 5201 NW 74 Ave. Miami, Fl. 33166 (800) 714-6191 FL. BAR# 0105260

#### ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

RAUL MEDINA JR. 6605 N.W. 74 Ave., Miami, Fl. 33166

Signature(s) of Incorporator(s)

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1.	The nam	e of the corporation:
		AMC AMBULANCE SERVICE INC.
2.	The nam	e and address of the registered agent and office is
		RAUL MEDINA JR. 6605 N.W. 74 Ave.
		(P.O. BOX NOT ACCEPTABLE)
		Miami, Florida 33166
		(CITY/STATE/ZIP)
1 2: 45	STATE	SIGNATURE
No. 7-	ARY UF (SSEE, F	TITLE Incorporator
奚		June 4, 1998

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE

June 4, 1998

DATE-