

P 98 0000 59453

Requestor's Name

MR. JOHN CICERO
3818 COLD CREEK DRIVE
VALRICO, FL 33594

Office Use Only

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98 JUL -2 PM 12:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. 100002567771--6
(Corporation Name) (Document #) -06/22/98--01065--005
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NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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W 98-111387
3827

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

June 23, 1998

JOHN CICERO
3818 COLD CREEK DRIVE
VALRICO, FL 33594

SUBJECT: PATIENT SUPPORT.COM, INC.
Ref. Number: W98000014387

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for PATIENT SUPPORT.COM, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.")

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6904.

Freida Chesser
Corporate Specialist

Letter Number: 098A00034505

ARTICLES OF INCORPORATION

OF

Patient Support.com, Inc.

ARTICLE I NAME

The name of the corporation shall be: Patient Support.com Inc.

ARTICLE II PRINCIPAL OFFICE

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

3818 Cold Creek Drive

Valrico, Florida 33594

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 10,000.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Pamela K Upshaw

3818 Cold Creeek Drive

Valrico, Florida 33594

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATOR

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

3818 Cold Creek Drive

Valrico, Florida 33594

The undersigned has executed these Articles of Incorporation this

12 day of June 1998.

Pamela K. Upshaw
Pamela K. Upshaw, Incorporator

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, 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 name of the corporation is:

PATIENT SUPPORT.COM, INC.

2. The name and address of the registered agent and office is:

Pamela K Upshaw

3818 Cold Creek Drive

Valrico, Florida 33594

Signature: Pamela K Upshaw

Title: President/ Incorporator

Date: 06/24/98

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: Pamela K Upshaw

Date: 6/29/98

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