

P98000097996

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

**SUBJECT:** NORTH FLORIDA MEDICAL COLLECTIONS, INC.  
(Proposed corporate name - must include suffix)

800002690568--9  
-11/18/98--01061--008  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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 of Status

☐ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** William McKeon  
Name (Printed or typed)  
908 NW 57th Street, Suite F  
Address  
Gainesville, FL 32605  
City, State & Zip  
(352) 331-7205  
Daytime Telephone number

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 NOV 18 AM 8:23

F. CHESSEY NOV 23 1998

**NOTE:** Please provide the original 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: NORTH FLORIDA MEDICAL COLLECTIONS, INC.

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### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 908 NW 57th Street  
Suite F  
Gainesville, FL 32605

### ARTICLE III SHARES

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

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

William McKeon, Esq.  
908 NW 57th Street, Suite F  
Gainesville, FL 32605

### ARTICLE V INCORPORATOR

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

Daniel H. Paul  
5021 NW 27th Drive  
Gainesville, FL 32605

  
Signature/Incorporator

November 16th, 1998  
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

November 16th, 1998  
Date