P4944407654

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

300002747753--5 -01/20/99--01057--001 *****87.50 *****87.50

SUBJECT:	Med-Logic =	Inc.	99	DINISION		
	(Proposed corpor	ate name - must include suff	fix)	FILED STATE PISION OF CORPORATION AND PH 4:0		
			·	O PHONE		
				F. P.		
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:						
\$70.00	\$78.75	□\$78.75	≱ 1.\$87.50			
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy			
		1	& Certificate of Status			
		ADDITIONAL CO				
FROM: Konald 6. Tenking Name (Printed or typed)						
6104 Oranco Hill Ch.						
6104 Orango Hill Cl. Address						
Oulando, F1. 32819						
Oulando, Fl. 32819 City, State & Zip						
407.876.4342						
Daytime Telephone number Ronald G. Jen Ki GAVE						
		AUTHORIZAT	ON BY PHONE TO	ne s		
		CORRECT_K.	26-99	* * * * * * * * * * * * * * * * * * *		
NOTE: Please provide the original and one copy of the articles.						
Г	OLE: Flease provide the or	iginai and one copy of	the al ucies.	(4)		

Articles of Incorporation of Med - Logic Inc.

I. <u>Name</u>

The name of the Corporation is Med - Logic Inc., hereinafter referred to as the "Corporation."

II. Purposes

The purpose of the Corporation is to transact any and all lawful business for which corporations may be incorporated under the laws of the State of Florida, as they may be amended from time to time.

III. Principal Office and Registered Agent

The principal office of the Corporation is 6104 Orange Hill Ct., Orlando, Florida 32819. The Corporation may maintain offices and/or transact business at other locations, either within or without the State of Florida. The name and address of the registered agent for service of process upon the Corporation is Ronald G. Jenkins, 6104 Orange Hill Ct., Orlando Florida 32819.

IV. **Duration**

The duration of the Corporation shall be perpetual.

V. Initial Business

The initial business of the Corporation shall be: Any lawful business

VI. **Capital Stock**

The Corporation is authorized to issue only one class of shares of stock which shall be designated Common Stock. The total number of shares the Corporation shall have authority to issue is __\OO___, each share to have a par value of \$_.O\

VII. **Incorporators**

The names and mailing addresses of the incorporators are:

Incorporator Name

Incorporator Address

Rouald 6. Jenkins

6104 Orange Hill Ct. Onlando, Fl. 32819

VIII. **Directors**

The number of directors constituting the initial Board of Directors of the Corporation is: . The name(s) and address(es) of the person(s) who is/are appointed to act as the initial director(s) of the Corporation is/are:

Director Name

Director Address

Rowald 6. Jerkins

6104 Orange Hill Ct. Orlando, Fl. 32819

Devise D. Terking

6104 Orange Will Ct

Outando, F1. 32819

IX. **No Personal Liability**

The private property of the stockholders shall not be subject to the payment of corporate debts.

X. **Operating Provisions**

The provisions for the operation, regulations, and management of the business and internal affairs of the Corporation shall be as set forth in the Bylaws, which may be amended from time to time by a majority vote of a quorum of the Board of Directors.

XI. <u>Fiscal Year</u>	
The fiscal year of the Corporation shall be from $\overline{\underline{\zeta}}$ of each year.	An 1 to Dec. 31
IN WITNESS WHEREOF, we have hereunto set out	r hands and seals on this, the
I am hereby familiar with and accepts the duties	and reponsibilities of Registered
Agent for said corporation. Incorporator/Registered Agent	
Deuse of Jenkins	-
-	' <u></u>

State of Florida	_ 	<u>-</u>			
County of <u>Orange</u>					
BEFORE ME, the undersigned authority, on this day personally appeared Royald Jenkins Denise Jenkins known to me to be the person described in, and whose name is subscribed to the foregoing document, who on oath stated to me that he/she executed the same for the purposes and consideration therein expressed.					
SUBSCRIBED AND SWORN T <u>January</u> , 19 <u>99</u> .	O BEFORE ME this the <u>15</u> day o	f			
My Commission Expires:	Notary Public in and for the State of Horida				
	MY COMMISSION # CC 754763 EXPIRES: July 24, 2662 Bonded Thru Notary Public Underwriters	-			
State of Florida		== -			
County of <u>Orange</u>		-			
BEFORE ME, the undersigned authority, on this day personally appeared					
My Commission Expires:	Notary Public in and for the State of Florida	: -			
	MY COMMISSION # CC 754763 EXPIRES: July 24, 2002 Bonded Thru Notary Public Underwriters				