P99 CTANSMITTAL ETTER 1013

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

SUBJECT:	merican Physica (Proposed corporate	e name - must include suffi	Inc.	
		ź	200002758 -01/29/99 *****70.00	-0107100
Enclosed is an original ar	nd one(1) copy of the article	es of incorporation and a	a check for:	3
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	OPY REQUIRED	
FROM:	Jeffrey 3. Name (Prin	Levy nted or typed)		-
	100 S.E. L	th Street		
		erdale, FL 33. Itate & Zip	SECRETARY ALLAHASSEI	oo T
	0 ,2	22- /060 lephone number	OF STATE E. FLORIDA	

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

TA-2/2/99

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Flo	orida
Business Corporation Act, hereby adopts the following Articles of Incorporation.	

The name of the corporation shall be: American Physicians Okoup, Inc.		
——————————————————————————————————————	SEC TAIL	
ARTICLE II PRINCIPAL OFFICE	E T	
The principal place of business and mailing address of this corporation shall be:	ASS CO	
2805 E. Oakland Park Blvd.	Ro z M	1
Building 324 Building 324 Fort Landendale, FL 33306 ARTICLE III SHARES	AHIO: 5)
	Dri 9	
The number of shares of stock that this corporation is anthorized to have outstanding at any one time	ie is:	
20 million shares		
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: Iches B. Levy 100 SE 6th St CH. Landerds	rect	301
ARTICLE V INCORPORATOR	ue, -	
<u></u>		
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:		
Patrick Edwards		
200 - E. Dabland Park	ZB/vol -	
Gotil Edwards For+ Landerdale, FL. 3	3306	
Signature/Incorporator 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

MORTILICATION CTOOLS AS A COMMENT MICHAEL OCCUPANT