FILED

FEB -8 AM 11: 50

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

SUBJECT:

Advanced Medical (Proposed corporate name - must include suffix)

100002691251-

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

Filing Fee & Certificate

**\$122.50** 

Filing Fee & Certified Copy \$131.25

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

10 avanced

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



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 23, 1998

WENDY L. SCHWEITZ 3215 S MACDILL, SUITE 4 TAMPA, FL 33629

SUBJECT: ADVANCED MEDICAL INSTITUTE, INC.

Ref. Number: W98000026384

We have received your document for ADVANCED MEDICAL INSTITUTE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete Articles I-V and have the registered agent sign.

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) 487-6915.

Pamela Hall Document Specialist

Letter Number: 998A00056100

mernight aires 3299

à				_	11. 50
<b></b>				, 99 FEB -8 A	W II: 20
The undersigned in	ncorporator, for the purpose o	of forming a corpo	ration under the Floria	la 33	
Business Corporati	tìon Act, hereby adopts the foll	lowing Articles of	Incorporation.	TALLANDOULL	
				Tall transplanting	FOUIDA
ARTICLE I	NAME			1 1.1	
The name of the	corneration shall be:	·-			
		<i>i</i> .Λ .	1 1 1 L N	1 1 1	
	advanced	Medica	I lost ted	I Luc.	
	O(Deopte (CI-	,		•	
ARTICLE II	PRINCIPAL OFFIC	<b>f</b> 5			
	ce of business and mailing a			= .	
The principal plan			<del>-</del>		
=	3215 J. M.	ac Dill 2	44		
	30-13	1/ 33/~	9	. <del></del>	e de la companya de
4 DØ101 D ***	Jampa,	H. 5360	- 1	•	
ARTICLE III	<u>SHARES</u>				
The number of sh	nares of stock that this corpo	ration is authori	zed to have outstandi	ng at any one time	is:
	1000 Shaves				_
	1000 State 6 3		•	Mark 1	* * *
ARTICLE IV	INITIAL REGISTE	RED AGENT	AND STREET A	DDRESS	
The name and Flo	orida street address of the in	itial registered a	gent are:		address: Uson Freef, \$1302 Tamps, 21. 33602
	Harold L.	SehringT	TT 940	Changeo	address.
	(3) Hor 6 Ken	- de Ati	JI 3175	- 100 mad	lison Steet, \$1,502
(	Toma 20	73/10	1 012 - 221	-4544	Tamps, Il.
ARTICLE V	INCORPORATOR	5560d	# 813-001	10 /	33602
	ddress of the incorporator to	a 4haan A -4:-1	-CT.		₩
THE HAME AND AC	ddress of the incorporator to	o mese Arncies (	of incorporation are:		
	WendyLic	Jehweite	544	+2 - 2 - 1	
	3215/7	Muchilly	J. 7.		
	Wendy LE 3215 / 8. Tampa, 21.	33629	- · · · · · · · · · · · · · · · · · · ·		· . <u></u> -
	,	Λ			

ARTICLES OF INCORPORATION

Signature/Incorporator

(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

Date