TRANSMITTAL LETTER

P99000025500

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

OC. EXAM

000002805510--: -03/15/99--01060--019 *****78.75 ******78.75

SUBJECT:	Vital Sta	tistics, Ine. rate name - must include suffix)	
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 □ \$87.50 Filing Fee Filing Fee, & Certified Copy & Certificate of Status	
		ADDITIONAL COPY REQUIRED	
FROM:	Donald G Name (P)	evala Doolittle	
	1019 Su	anset Ln.	-
	Lynn Ha	ven, F/. 32444	
	(850) 2	65-50/4 PS 3	-
	20.76	9-1551 弱元	
	lfl	4 2834 SEPERIN) - .,
an One O. Afla N	OTE: Please provide the or	riginal and one copy of the articles. \overrightarrow{F}	

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.

Vital Statistics, Inc. The name of the corporation shall be: PRINCIPAL OFFICE ARTICLE II The principal place of business and mailing address of this corporation shall be: 1019 Sunset Ln., Lynn Haven, FL, 32444 *ARTICLE III* SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 3 REGISTERED AGENT AND STREET A Gerald Doolittle, 1019 Sunset Ln., Lynn Haven. The name and Florida street address of the initial registered agent are: *INCORPORATOR* The <u>name and address</u> of the incorporator to these Articles of Incorporation are: Vooliffle Sunset Haven 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