

TRANSMITTAL LETTER

P99000054505

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

SUBJECT:

Advanced Mobility - Medical Digest Inc
(Proposed corporate name - must include suffix)

100002904421--D

-06/15/99-01009-002

*****87.50 *****87.50

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:

Sally A. Gunn
Name (Printed or typed)

Box 1615
Address

Cocoa Corn, FL 32910
City, State & Zip

941-997-6668
Daytime Telephone number

FILED
99 JUN 15 AM 8:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

T. SMITH JUN 16 1999

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:

Advanced Mobility Medical Dsgt Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

560 Pine Island Rd
W Ft. Meyers, FL 33903

ARTICLE III SHARES

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

3000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Sally A Gurn
1604 Edith Esplanade
Cape Coral, FL 33904

ARTICLE V INCORPORATOR

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

Sally A. Gurn
1604 Edith Esplanade
Cape Coral, FL 33904

Sally A. Gurn

Signature/Incorporator

Sally A Gurn

6/9/99

Date

FILED
99 JUN 15 AM 8:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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

Sally A. Gurn

Signature/Registered Agent

Sally A Gurn

6/9/99

Date