

TRANSMITTAL LETTER

990000094587

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

600003024056--2
-10/25/99--01108--002
*****70.00 *****70.00

SUBJECT: Cardiovascular Nurses Incorporated
(Proposed corporate 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
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Cardiovascular Nurses Incorporated
Name (Printed or typed)

7930 Palacio Del Mar Drive
Address

Boca Raton, FL 33433
City, State & Zip

561-347-0623
Daytime Telephone number

FILED
99 OCT 25 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Cherie Vouten GAVE
AUTHORIZATION BY PHONE TO
CORRECT ART III
DATE 10/27
DOC. EXAM SH

S. Thompson OCT 27 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:

Cardiovascular Nurses Incorporated

ARTICLE II PRINCIPAL OFFICE

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

7930 Palacio Del Mar Drive
Boca Raton, FL 33433

ARTICLE III SHARES

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

3000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Linda Perry
2406 Aspen Way
Boynton Beach, FL 33436

ARTICLE V INCORPORATOR

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

Linda Perry
2406 Aspen Way
Boynton Beach, FL 33436

Linda Perry
Signature/Incorporator

10-15-99
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.

Linda Perry
Signature/Registered Agent

10-15-99
Date

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE