

03000059418

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

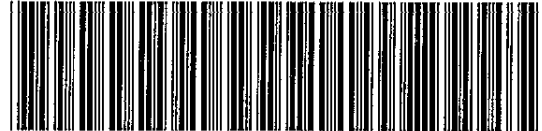
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
03 MAY -7 AM 11:05
DIVISION OF INFORMATION

03 MAY 29 PM 2:18
STATE
SECRETARY OF
TALLAHASSEE

FILED

03-13/3

03-5/30

ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, FL 32308

City/St/Zip

850-222-2785

Phone #

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

- 1- PROFESSIONAL HEALTHCARE SERVICES, INC.
- 2-
- 3-
- 4-

- ☒ Walk-in ☐ Pick-up time ASAP ☐ Certified Copy
- ☐ Mail-out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

RECEIVED
03 MAY 30 AM 10:43
DIVISION OF CORPORATION

May 7, 2003

ATTORNEYS' TITLE

SUBJECT: PROFESSIONAL HEALTHCARE SERVICES, INC.
Ref. Number: W03000013136

We have received your document for PROFESSIONAL HEALTHCARE SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6972.

Doris Brown
Document Specialist
New Filings Section

Letter Number: 403A00028367

ARTICLES OF INCORPORATION
OF
ADMINISTRATIVE HEALTHCARE SERVICES, INC.

FILED
03 MAY 30 PM 2:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

In compliance with the requirements of Florida Statutes, Chapter 607, the undersigned, being a natural person, does hereby act as an incorporator in adopting and filing the following articles of incorporation for the purpose of organizing a business corporation.

ARTICLE I

The name of the corporation ("Corporation") is: Administrative Healthcare Services, Inc.

ARTICLE II

Pursuant to Section 607.0203, Florida Statutes, this Corporation shall commence upon the date of execution of these Articles of Incorporation. This Corporation shall have perpetual existence.

ARTICLE III

The street address of the principal office of the Corporation is 3524 Pintail Drive South, Jacksonville Beach, Florida 32250.

ARTICLE IV

This Corporation is authorized to issue 1,000 shares of Common Stock, all of which shall have a par value of \$1.00 per share.

ARTICLE V

The initial street address of the Corporation's registered office is 3524 Pintail Drive South, Jacksonville Beach, FL 32250. The initial registered agent for the Corporation at that address is Nancy G. Ralston.

ARTICLE VI

The initial board of director shall consist of one (1) member. The name and address of the person who will serve on the initial board of directors is:

Name	Position	Address
Nancy G. Ralston	President	3524 Pintail Drive South
	Treasurer	Jacksonville, Florida 32250

ARTICLE VII

The name and street address of the person signing these articles of incorporation is:

Name	Address
Nancy G. Ralston	3524 Pintail Drive South Jacksonville Beach, FL 32250

ARTICLE VIII

The corporation shall indemnify its directors, officers, employees, and agents to the fullest extent permitted by law.

IN WITNESS WHEREOF, the undersigned incorporator has executed these articles of incorporation this 17 day of May, 2003.



Name: Nancy G. Ralston

ACCEPTANCE OF REGISTERED AGENT

Having been named to accept service of process for Administrative Healthcare Services, Inc., at the place designated in the articles of incorporation, the undersigned is familiar with and accepts the obligations of that position pursuant to Florida Statute 607.0501(3).

Nancy G. Ralston
Name: Nancy G. Ralston

Date: 5/17/03

03 MAY 30 PM 2:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA