

1201 HAYS STREET
TALLAHASSEE, FL 32301
904-222-9171
904-222-0191 FAX

800-342-8086



P9500031973

ACCOUNT NO. : 872 100 03

REFERENCE : 583627 9376A

AUTHORIZATION :

Patricia Pjunt

COST LIMIT : 9 70.00

ORDER DATE : Apr 11 21, 1995

ORDER TIME : 11:06 AM

ORDER NO. : 583627

CUSTOMER NO: 9376A

CUSTOMER: Ms. Diane Coe, Cpa
LOTT & LEVINE

700001463067

Suite 302
5975 Sunset Drive
Miami, FL 33143

DOMESTIC FILING

NAME: ANDERSON HEALTH CARE SERVICES,
INC.

FILED
95 APR 24 AM 8:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

☒ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Debbie Skipper

EXAMINER'S INITIALS:

T. BROWN APR 25 1995

ARTICLES OF INCORPORATION
OF
ANDERSON HEALTH CARE SERVICES, INC.

FILED
95 APR 24 AM 8:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

ANDERSON HEALTH CARE SERVICES, INC.

The address of the principal office of this corporation shall be 511 Oriole Avenue, Miami Springs, Florida 33166, and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 600 shares of common stock having \$1.00 par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 5975 Sunset Drive, Suite 302, Miami, Florida 33143, and the name of the initial registered agent of the corporation at that address is George J. Lott.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. DIRECTORS

All corporate powers shall be exercised by or under the authority of, and the business and affairs of the corporation managed under the direction of its Board of Directors, subject to any limitation set forth in these Articles of Incorporation. This corporation shall have one Director, initially. The name and address of the initial member of the Board of Directors are:

Wayne O. Anderson
Dir.

511 Oriole Avenue
Miami Springs, Florida 33166

ARTICLE VII. OFFICERS

The name and addresses of the initial officers of the corporation who shall hold office for the first year of the corporation, or until their successors are elected or appointed are:

David P. Anderson Pres.	511 Oriole Avenue Miami Springs, Florida 33166
Oliver D. Anderson Treas.	Same

ARTICLE VIII. INCORPORATOR

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

Corporation Information Services, Inc.
1201 Hays Street
Tallahassee, Florida 32301

IN WITNESS WHEREOF, the undersigned agent of Corporation Information Services, Inc., has hereunto set their hand and seal of Corporation Information Services, Inc., on April 24, 1995.

CORPORATION INFORMATION SERVICES, INC.

By: 
Its Agent, Gail Shelby

LRD/dks

FILED
95 APR 24 AM 8:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ACCEPTANCE OF REGISTERED AGENT
DESIGNATED IN THE ARTICLES OF INCORPORATION

I, GEORGE J. LOTT, an individual residing in this state having a business office identical with the registered office of the corporation named below, and having been designated as the Registered Agent in the above and foregoing Articles of Incorporation of:

Anderson Health Care Services, Inc.

is familiar with and accepts the obligations of the position of Registered Agent under Section 607.0505, Florida Statutes.

By: _____

GEORGE J. LOTT

P95000031973

L. M. Bloucha

Requestor's Name

Post Office Drawer 2088

Address

Hollywood, FL 33022-2088

City/State/Zip

Phone #

Office Use Only

FILED
96 JUN 24 AM 11:58
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

1. _____ (Corporation Name) _____ (Document #) **400001875124**
-06/25/96--0105--010
*****87.50 *****87.50
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

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

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<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

N/C

VS JUN 28 1996

ARTICLES OF AMENDMENT OF
ANDERSON HEALTH CARE SERVICES, INC.

ITEM I.

Article I of the Articles of Incorporation of ANDERSON HEALTH CARE SERVICES, INC. is hereby amended to read:

ARTICLE I

Name


The name of this Corporation shall be:

ANDERSON REIMBURSEMENT CONSULTING GROUP, INC.

ITEM II.

The foregoing Amendment was adopted by the unanimous consent of the sole stockholder and the directors of this Corporation on the 17th day of June, 1996.

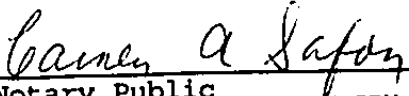
IN WITNESS WHEREOF, the undersigned President and Secretary of this Corporation has executed these Articles of Amendment this 17th day of June, 1996.



DAVID P. ANDERSON, President and
Secretary

STATE OF FLORIDA)
) SS.:
COUNTY OF DADE)

17 The foregoing instrument was acknowledged before me this day of June, 1996, by DAVID P. ANDERSON, President and Secretary of ANDERSON HEALTH CARE SERVICES, INC., who is personally known to me or has produced _____ as identification.



Notary Public

CARMEN A. SAFON
COMMISSION # CC 508832
EXPIRES FEB 19, 2000
BONDED THRU
ATLANTIC BONDING CO., INC.