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(Requestor's Name)

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(City/State/Zip/Phone #)

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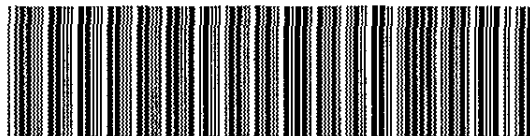
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02/1/9

TRANSMITTAL LETTER

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

SUBJECT: HEALTH Insurance Education + Research Center, Inc.
(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

ADDITIONAL COPY REQUIRED

FROM: Timothy J. Atchae
Name (Printed or typed)

342 Bayside PARKWAY
Address

Nokomis, FL 34275
City, State & Zip

941-374-8522
Daytime Telephone number

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

Articles of Incorporation

In compliance with Chapter 617, Florida Statutes (Not for Profit)

Article I Name

The name of the corporation shall be: Health Insurance Education and Research Center, Inc.

Article II Principal Office

The original location of the corporate office of Health Insurance Education and Research Center, Inc. shall be 342 Bayside Parkway Nokomis, FL 34275.

Article III Purpose

The purpose for which the corporation is organized can be summed up in our mission: to provide a source of non-biased health insurance and health care information to consumers, media professionals, insurance professionals and elected legislative officials as well as assist in forming public policy as it relates to the American health insurance and health care financial and delivery system.

Article IV Manner of Election

The manner in which the directors are elected or appointed:
Directors are appointed on the merit of one or more of the following professional achievements, professional experience or expertise and education.

- PHD qualifications in the health care or health care financing field.
- Fundraising experience of not less than 5 years with a not-for-profit.
- Health care experience of not less than 10 years having experience with traditional insurance and managed care.
- Board of director experience of not less than 3 years with another not-for-profit corporation.
- Home office experience of not less than 5 years with a health insurance carrier specializing in medical insurance.
- Actuarial experience of not less than 5 years with a concentration on group medical insurance work.

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TALLAHASSEE, FLORIDA

Article V Initial Directors/Officers

The following are appointed as initial directors or officers of the corporation:

Timothy J. Pitcher
342 Bayside Parkway
Nokomis, FL 34275

Joann Pitcher
3223 Gifford Lane
Sarasota, FL 34239
Secretary and Treasurer

Wendy Michelle Schenz
5546 Fairwood
Cincinnati, OH 45239

Deborah Pitcher, PHD
6 Breckenridge
Bloomington, IL

Brian Weible, FSA, MAAA
19321 US Highway N 19 Suite 515
Clearwater, FL 33764-3143

The corporation shall have a board of not less than 5 and not more than 13 directors.
Initial board members will serve a period of not less than 18 months and not more than
60 consecutive months with the exception of the president and founder.


Article VI Initial Registered agent and street address

Timothy Pitcher
342 Bayside Parkway
Nokomis, FL 34275

Article VII Incorporator

Timothy Pitcher
342 Bayside Parkway
Nokomis, FL 34275

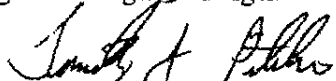
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated
in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*



Signature/Registered Agent

1-2-03

Date



Signature/Incorporator

1-2-03

Date

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TALLAHASSEE, FLORIDA