

NO 3000008791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

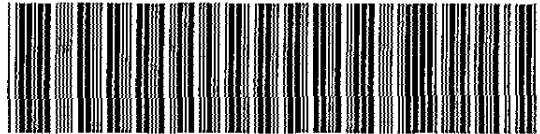
(Document Number)

Certified Copies 1

Certificates of Status \_\_\_\_\_

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 OCT -9 PM 3:26

RECEIVED  
03 OCT -9 PM 3:13  
DIVISION OF CORPORATION

10/19

W. Kirk Brown  
 Requestor's Name  
 215 Delta Court  
 Address  
 Tallahassee, FL 32303 (850) 222-6129  
 City/State/Zip Phone #

Office Use Only

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

1. \_\_\_\_\_  
 (Corporation Name) (Document #)
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 |                   |
|-------------|-------------------|
|             | Profit            |
| X           | NonProfit         |
|             | Limited Liability |
|             | Domestication     |
|             | Other             |

| AMENDMENTS |  |
|------------|--|
|            | Amendment                              |
|            | Resignation of R.A., Officer/ Director |
|            | Change of Registered Agent             |
|            | Dissolution/Withdrawal                 |
|            | Merger                                 |

| OTHER FILINGS |                  |
|---------------|------------------|
|               | Annual Report    |
|               | Fictitious Name  |
|               | Name Reservation |

| REGISTRATION/<br>QUALIFICATION |                     |
|--------------------------------|---------------------|
|                                | Foreign             |
|                                | Limited Partnership |
|                                | Reinstatement       |
|                                | Trademark           |
|                                | Other               |

|                     |  |
|---------------------|--|
| Examiner's Initials |  |
|---------------------|--|

ARTICLES OF INCORPORATION

of

COMMUNITY HEALTH MANAGEMENT N.W., INC.

(A Florida Not for Profit Corporation, organized under Chapter 617, Florida Statutes)

FILED STATE  
SECRETARY OF CORPORATIONS  
DIVISION  
03 OCT - 9 PM 3:21

KNOW ALL MEN BY THESE PRESENTS: That the undersigned, for the purpose of organizing a corporation under and pursuant to the provisions of the Constitution and the laws of the State of Florida, and in compliance with Chapter 617, Florida Statutes, hereby agrees to unite and associate as a corporation not for profit, and hereby makes, executes and adopts the following Articles of Incorporation.

ARTICLE I

Name

The name of this corporation is: COMMUNITY HEALTH  
MANAGEMENT N.W., INC.

ARTICLE II

Principal Office

The principal place of business and mailing address of this corporation are:

535 John Knox Road, Tallahassee, FL 32303

ARTICLE III

Purpose

The purpose for which this corporation is organized is to provide management services.

ARTICLE IV

Manner of Election

The method of election of directors shall be as stated in the Bylaws.

ARTICLE V

Registered Office and Registered Agent

The street address of the corporation's initial registered office and the name of its initial registered agent at that address are:

Joel Montgomery  
535 John Knox Road  
Tallahassee, FL 32303

ARTICLE VI

Incorporator

The incorporator for these Articles of Incorporation is:


Joel Montgomery  
535 John Knox Road  
Tallahassee, FL 32303

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DIVISION OF CORPORATIONS  
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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.

  
Joel Montgomery, Registered Agent

10-9-03  
Date

  
Joel Montgomery, Incorporator

10-9-03  
Date