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Special Instructions to	Filing Officer:	



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Office Use Only

Michael D. Chiumento Michael D. Chiumento III Gary B. Davenport



Telephone: (386)445-8900 Fax: (386)447-1336 Real Estate Fax: (386)445-0672

May 3, 2004

Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: The Giving Health Center, Inc.

Dear Sir/Madam:

Enclosed please find an original and one (1) copy of the Articles of Incorporation concerning The Giving Health Center, Inc., together with our firm's check in the amount of \$78.75 representing your filing fee. If all is in order, kindly file the Articles and return a certified copy of same to the undersigned.

If you have any questions, please do not hesitate to call.

Sincerely,

when Sheel

Karolyn Sheekey Secretary

encl.



ARTICLES OF INCORPORATION

of

THE GIVING HEALTH CENTER, INC.

The undersigned incorporators of these Articles of Incorporation, each a natural person competent to contract, hereby associate themselves together to form a not for profit corporation under the laws of the State of Florida.

ARTICLE I. NAME

The name of this corporation is:

THE GIVING HEALTH CENTER, INC.

ARTICLE II. NATURE OF BUSINESS

The general nature of the business to be transacted by this corporation is to engage in the health and physical fitness for support and benefit of Cystic Fibrosis.

A. The advancement of religion, charity, education and any other related or corresponding charitable purposes by the distribution of its funds for such purposes.

ARTICLE III. QUALIFICATION OF MEMBERS

The membership of this corporation shall constitute all persons hereinafter named as subscribers and such other persons as, from time to time hereafter, may become members, in the manner provided in the By-Laws.

ARTICLE IV. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V. ADDRESS

The mailing and street address of the initial principal office of this corporation in the State of Florida is 81 Woodhaven Drive, Palm Coast, FL 32164. The Board of Directors may, from time to time, move the principal office or mailing address to any other addresses in Florida.

ARTICLE VI. DIRECTORS

The corporation shall have three (3) directors initially. The number of directors may be increased or decreased from time to time, by By-Laws adopted by the stockholders.

ARTICLE VII. INITIAL DIRECTORS

The names and post office addresses of the members of the first Board of Directors are:

<u>Name</u>

Katrina Reneau-Rich

Dawn Roffey

James Reneau

81 Woodhaven Drive Palm Coast, FL 32164

81 Woodhaven Drive Palm Coast, FL 32164

Address

81 Woodhaven Drive Palm Coast, FL 32164

ARTICLE VIII. INCORPORATORS

The name and post office address of each incorporator of these Articles of Incorporation is:

<u>Name</u>

Address

Michael D. Chiumento

4 Old Kings Road North, Suite B Palm Coast, FL 32137

ARTICLE IX. AMENDMENT

These Articles of Incorporation may be amended in the manner provided by law.

ARTICLE X. REGISTERED AGENT AND OFFICE

The registered agent and office for this corporation shall be Michael D. Chiumento, Esquire, 4 Old Kings Road North, Suite B, Palm Coast, Florida 32137, to accept service of process within this State as to this corporation. The Registered Agent and office of the Corporation may be changed by the Corporation at anytime in accordance with the provisions of Florida taw.

HAEL D. CSILIMENTO

**. E.F

MICHAEL D. USIUMENTO

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST: THAT THE GIVING HEALTH CENTER, INC., DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT 81 WOODHAVEN DRIVE, PALM COAST, FLORIDA 32164, HAS NAMED MICHAEL D. CHIUMENTO, ESQUIRE, 4 OLD KINGS ROAD NORTH, SUITE B, STATE OF FLORIDA, 32137 AS ITS REGISTERED AGENT AND OFFICER TO ACCEPT SERVICE OF PROCESS WITHIN FLÖRIDA.

DATE: MAY 2, 2004

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE-STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

L D. CHIUMEN

REGISTERED AGENT DATE: MAY 2, 2004