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COVER LETTER

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

SUBJECT: _____ THE HENRY MEDICAL CENTER (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

Filing Fee

✓\$78.75
Filing Fee &
Certificate of
Status

\$78.75 Filing Fee & Certified Copy State State

ADDITIONAL COPY REQUIRED

FROM: LAW OFFICE OF NICOLE VALERIE JOHNSON Name (Printed or typed)

> 2866 WATERBROOK WAY Address

TALLAHASSEE, FLORIDA 32312 City, State & Zip

850 -727-4128

Daytime Telephone number



E-mail address: (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a not-for profit corporate entity under Florida Statutes, Chapter 617, adopt(s) the following Articles of Incorporation.

ARTICLE I

The name of this corporation shall be: THE HENRY MEDICAL CENTER, INC.

ARTICLE II

The principal place of business address is: 5408 TOURAINE DRIVE TALLAHASSEE, FLORIDA 32308

The mailing address of corporation is: P.O. BOX 14871 TALLAHASSEE, FLORIDA 32317

ARTICLE III

The purpose for which this organization is formed: SAID ORGANIZATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL, AND SCIENTIFIC PURPOSES, INCLUDING, FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE.

ARTICLE IV

The manner in which directors are elected or appointed: AS PROVIDED FOR IN THE BYLAWS

ARTICLE V

The Initial Directors are as follows:

Title: DIRECTOR LIONEL HENRY 5408 TOURAINE DRIVE TALLAHASSEE, FLORIDA 32308

Title: DIRECTOR MARIA HENRY 5408 TOURAINE DRIVE TALLAHASSEE, FLORIDA 32308

30 -9 AM 11:

Title: DIRECTOR KHARY HENRY 5408 TOURAINE DRIVE TALLAHASSEE, FLORIDA 32308

The Initial Officers are as follows:

Title: PRESIDENT LIONEL HENRY 5408 TOURAINE DRIVE TALLAHASSEE, FLORIDA 32308

ARTICLE VI

The name and Florida address of the registered agent is:

LAW OFFICE OF NICOLE VALERIE JOHNSON, P.A. 2866 WATERBROOK WAY TALLAHASSEE, FLORIDA 32312

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 of Registered Agent:

ARTICLE V	SECH	IS 60	ca that
The name and address of the Incorporator is:	HASS	6- d3	
NICOLE VALERIE JOHNSON, ATTORNEY AT LAW LAW OFFICE OF NICOLE VALERIE JOHNSON, P.A. 2866 WATERBROOK WAY TALLAHASSEE, FLORIDA 32312	Y OF STATE	AH 11: 53	m
Signature of Incorporator: / Challer Description			