

12/11/2020

**N200000013952**

Florida Department of State

Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
PARAMOUNT CARE OF FLORIDA, INC.**

Certificate of Status	0
Certified Copy	1
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December 16, 2020

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: PARAMOUNT CARE OF FLORIDA, INC.  
REF: W200001433012020 DEC 17 PM 4:57  
F11 P-17

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Lillie S Kervin  
Regulatory Specialist IIFAX Aud. #: H20000423602  
Letter Number: 520A00025444

FBI - FLA

2020 DEC 17 PM 4:56

**ARTICLES OF INCORPORATION**  
**OF**  
**PARAMOUNT CARE OF FLORIDA, INC.**

A Florida Not-For-Profit Corporation

These Articles of Incorporation are signed and acknowledged by the sole incorporator for the purpose of forming a not-for-profit corporation under the provision of Chapter 617 of the Florida Statutes known as the Florida Not For Profit Corporation Act, as follows:

**ARTICLE I**  
**NAME**

The name of the Corporation shall be Paramount Care of Florida, Inc. (the "Corporation").

**ARTICLE II**  
**PRINCIPAL OFFICE**

The street address of the principal place of business and mailing address of the Corporation shall be 1901 Indian Wood Circle, Maumee, OH 43537.

**ARTICLE III**  
**PURPOSE**

The purpose or purposes for which the Corporation is organized are:

To (a) establish, be licensed as, and operate a health maintenance organization and carry on any function in connection therewith that is permitted by the laws of the State of Florida; (b) provide or arrange for the provision of comprehensive health care services and population health programs and activities for the Corporation's enrollees and the community served by the Corporation; (c) sponsor, educate, promote and advance the quality of care and accessibility of health care services for the Corporation's enrollees and the communities served by the Corporation; and (d) engage in any other act or activity for which the Corporation may be organized or permitted to engage in under the Florida Not For Profit Corporation Act and the laws of the State of Florida.

In carrying out its purposes, the Corporation shall have, and may exercise, all of the powers and authorities that may be conferred upon, or granted or allowed to, health maintenance

organizations by the State of Florida and, in addition to and so far as not inconsistent with the foregoing, upon non-for profit corporations formed under the Florida Not For Profit Corporation Act to carry out such purposes.

#### **ARTICLE IV MANNER OF ELECTION**

The Directors of the Corporation shall be elected by the member as provided in the Bylaws and shall hold their offices for such period as the Bylaws shall establish, or until their successors are duly elected and qualified.

#### **ARTICLE V BOARD OF DIRECTORS**

The property, affairs, business and operation of the Corporation shall be managed by a Board of Directors. The number of the Directors shall be as provided in the Bylaws of the Corporation, and may be increased or decreased from time to time, in accordance with the Bylaws of the Corporation, but shall never be less than five (5).

#### **ARTICLE VI REGISTERED AGENT**

The name and the street address of the initial registered agent of the Corporation shall be as follows:

C T Corporation System  
1200 South Pine Island Road  
Plantation, Florida 33324

#### **ARTICLE VII EFFECTIVE DATE**

The effective date of these Articles of Incorporation shall be the date of filing.

#### **ARTICLE VIII AMENDMENTS**

The power to amend the Articles of Incorporation shall be reserved exclusively to the Member.

**ARTICLE IX  
INCORPORATOR**

The name and address of the sole incorporator of the Corporation is stated below:

Name	Address
Cindy Zalewski, Esq.	100 Madison Ave., MSC-S3-9938 Toledo, OH 43604

IN WITNESS WHEREOF, the sole incorporator has hereunto set her hand and seal this 10th day of December, 2020.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

*Cynthia H. Zalewski*  
Signature of Sole Incorporator

12/10/2020  
Date

**ACCEPTANCE OF APPOINTMENT BY REGISTERED AGENT**

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



Stephen Rullis  
VP & Asst. Secy.

12/9/2020

\_\_\_\_\_  
Signature of Registered Agent

\_\_\_\_\_  
Date