

FROM HILL, WARD, HENDERSON, P.A.

(TUE) 1.18'00 17:32/ST. 17:31/NO. 4260294075 P 1

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**Florida Department of State**

**Division of Corporations**

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**From:**

Account Name : HILL, WARD & HENDERSON, P.A. II  
Account Number : 072100000520  
Phone : (813) 221-3900  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT CORPORATION OR P.A.**

**Nature Coast Healthcare Management Solutions, Inc.**

Certificate of Status	0
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(TUE) 1.18'00 17:32/ST. 17:31/NO. 4260294075 P. 2

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION  
OF  
NATURE COAST HEALTHCARE MANAGEMENT SOLUTIONS, INC.**

I, the undersigned, hereby make, subscribe, acknowledge and file with the Secretary of State of the State of Florida these Articles of Incorporation for the purpose of forming a corporation for profit in accordance with the laws of the State of Florida.

**ARTICLE I**

**Name**

The name of this corporation shall be:

NATURE COAST HEALTHCARE MANAGEMENT SOLUTIONS, INC.

**ARTICLE II**

**Address**

The address of the principal office and the mailing address of this corporation shall be:

5229 West Gala Lane  
Dunellon, Florida 34433

**ARTICLE III**

**Existence of Corporation**

This corporation shall have perpetual existence.

**ARTICLE IV**

**Purposes**

The corporation may engage in the transaction of any or all lawful business for which corporations may be incorporated under the laws of the State of Florida.

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## **ARTICLE V**

### **Capital Stock**

(a) The total number of shares of capital stock authorized to be issued by the corporation shall be 10,000 shares having a par value of \$1.00 per share. Each of the said shares of stock shall entitle the holder thereof to one (1) vote at any meeting of the stockholders. All or any part of said capital stock may be paid for in cash, in property or in labor or services actually performed for the corporation and valued at a fair valuation to be fixed by the Board of Directors at a meeting called for such purpose. All stock when issued shall be paid for and shall be nonassessable.

(b) In the election of directors of this corporation there shall be no cumulative voting of the stock entitled to vote at such election.

## **ARTICLE VI**

### **Registered Office and Registered Agent**

The street address of the corporation's initial registered office is 7959 North Moonwind Terrace, Dunellon, Florida 34433, and the name of the corporation's initial registered agent at such address is Randolph G. Wardlow. The corporation may change its registered office or its registered agent or both by filing with the Department of State of the State of Florida a statement complying with Section 607.0502, Florida Statutes.

## **ARTICLE VII**

### **Incorporators**

The name and address of the incorporator of this corporation is as follows:

<u>Name</u>	<u>Address</u>
Randolph G. Wardlow	7959 North Moonwind Terrace Dunellon, Florida 34433

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(TUE) 1.18'00 17:32/ST. 17:31/NO. 4260294075 P 4

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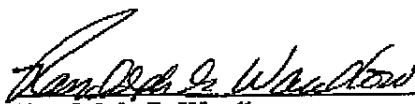
**ARTICLE VIII**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Amendment of Articles of Incorporation**

The corporation reserves the right to amend, alter, change or repeal any provision contained in these Articles of Incorporation in the manner now or hereafter prescribed by statute, and all rights conferred upon the stockholders herein are subject to this reservation.

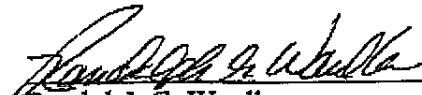
IN WITNESS WHEREOF, I, the undersigned, have executed these Articles for the uses and purposes therein stated.

  
Randolph G. Wardlow

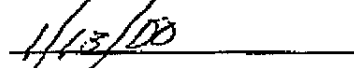
**REGISTERED AGENT CERTIFICATE**

Having been named to accept service of process for the above stated corporation, I hereby accept appointment as its agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature

  
Randolph G. Wardlow

Date:



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