

Division of Corporations

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To:

Division of Corporations
Fax Number : (850) 922-4001

From:

Account Name : ACE INDUSTRIES, INC.
Account Number : 070744001530
Phone : (305) 358-2571
Fax Number : (305) 358-7832

FLORIDA PROFIT CORPORATION OR P.A.**EMP HEALTHCARE, INC.**

Certificate of Status	0
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ARTICLES OF INCORPORATION

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Article 1: Name of Corporation: EMP HEALTHCARE, INC.

Address of Corporation: 2857 NORTHWEST 91 AVENUE #206

CORAL SPRINGS, FLORIDA 33065

Article 2: CAPITAL STOCK: The number of shares which the corporation has authorized to be outstanding at any one time is 20, with a par value of OMIT.
(PAR VALUE IS NOT REQUIRED).

Article 3: REGISTERED AGENT: WANDA L. WILLIAMS

REGISTERED OFFICE: 2857 NORTHWEST 91 AVENUE #206

CORAL SPRINGS, FLORIDA 33065

* I am familiar with and hereby accept the duties and responsibilities as Registered Agent for said corporation.

02 / 08 / 00
Date

Wanda L. Williams
Signature of Registered Agent

Article 4: The Board of Directors are: (Board of Directors is NOT REQUIRED).
First listed is President, second is Vice President, then Secretary/Treasurer.

1. WANDA L. WILLIAMS, 2857 NORTHWEST 91 AVENUE #206, CORAL SPRINGS, FLORIDA 33065
2. ROBERT A. WILLIAMS JR., 2857 NORTHWEST 91 AVENUE #206, CORAL SPRINGS, FLORIDA 33065
3. ROBERT A. WILLIAMS JR., 2857 NORTHWEST 91 AVENUE #206, CORAL SPRINGS, FLORIDA 33065

Article 5: The NAME and ADDRESS of the INCORPORATOR is:

WANDA L. WILLIAMS

2857 NORTHWEST 91 AVENUE #206

CORAL SPRINGS, FLORIDA 33065

In witness whereof, I have subscribed my name:

Wanda L. Williams
Signature of Incorporator

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