

TRANSMITTAL LETTER

P00000063738

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

000003307690--2
-06/28/00-01059--008
*****78.75

SUBJECT: HEALTH 1ST CONSULTING, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

000003307690--2
-06/28/00-01059--008
*****78.75 *****78.75

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

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: DAVID E MUSGRAVE
Name (Printed or typed)

2947 S.E. 39TH PLACE
Address

OCALA FLORIDA 34480-8442
City, State & Zip

352-624-0959
Daytime Telephone number

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

FILED
00 JUN 28 AM 10:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6-30-00
3

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: **Health 1st Consulting, Inc.**

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: **2947 S.E. 39th Place
Ocala, Florida 34480-8442**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **to provide consulting, management and any other personal services to healthcare providers and other entities, which provide services or products to healthcare providers or healthcare purchasers. The foregoing purpose is interpreted as example only and not as limitations, and nothing therein shall be deemed as prohibiting the corporation of extending its activities to any related or otherwise permissible law business purpose which may become necessary, profitable or desirable for the furtherance of the corporate objectives expressed above.**

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INTIAL OFFICERS/DIRECTORS (optional)

The names(s) and address(es):

**President, Treasurer and CEO: David E. Musgrave
2947 S.E. 39th Place
Ocala, Florida 34480-8442**

**Vice-President and Secretary: Deborah L. Musgrave
2947 S.E. 39th Place
Ocala, Florida 34480-8442**

ARTICLE VI RESISTERED AGENT

The **name and Florida street address** of the registered agent is:

**David E. Musgrave
2947 S.E. 39th Place
Ocala, Florida 34480-8442**

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

**David E. Musgrave
2947 S.E. 39th Place
Ocala, Florida 34480-8442**

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TALLAHASSEE, FLORIDA

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

Deborah L. Mcgraw
Signature/Registered Agent

6-26-00
Date

[Signature]
Signature/Incorporator

6/26/00
Date

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JUN 28 AM 10:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA