

TRANSMITTAL LETTER

P00000064720

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

100003309601--6
-06/30/00--01011--003
*****78.75 *****78.75

SUBJECT: ASK HealthCare Management, Inc.
(Proposed corporate name - must include suffix)

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: Larry Eugene Cumbie
Name (Printed or typed)

Suite D-1, 2000 Banks Rd
Address

Margate, FL 33063
City, State & Zip

(954) 969-1966
Daytime Telephone number

FILED
JUN 30 PM 3:13
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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

7-5-00
2

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

ASK HealthCare Management, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

Suite D-1
2000 Banks Rd.
Margate, FL 33063

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Larry Eugene Cumbie
#802
4300 Rock Island Rd, Lauderdale, FL 33319

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Larry Eugene Cumbie
#802
4300 Rock Island Rd
Lauderdale, FL 33319

Larry Eugene Cumbie
Signature/Incorporator

June 23, 2000
Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered 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

Larry Eugene Cumbie
Signature/Registered Agent

June 23, 2000
Date

FILED
JUN 30 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA