

07-11-2000

P000000069657

Department of State  
Divisions of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: HEALTH INCENTIVES 2000, INC.

(name of corporation)

Gentlemen:

900003325589-15  
07/18/00 DT003-011  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$78.75

This represents the cost of Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Please Mail The Articles of Corporation to the below listed address:

Very truly yours,

FRANCIS X. D'AMICO

(individual's name)

HEALTH INCENTIVES 2000, INC.

(name of corporation)

MAILING ADDRESS OF CORPORATION

5239 LA PLATA DRIVE

NEW PORT RICHEY, FL 34655

727

375-5021

(Area Code) Telephone Number

Extension

FILED  
00 JUL 18 AM 11:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

7-21  
WC

ARTICLES OF INCORPORATION

of

HEALTH INCENTIVES 2000 INC.

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

*ARTICLE I - CORPORATE NAME*

The name of the corporation is:

HEALTH INCENTIVES 2000 INC.

*ARTICLE II - DURATION*

This Corporation shall exist perpetually unless dissolved according to Florida law.

*ARTICLE III - PURPOSE*

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

*ARTICLE IV - CAPITAL STOCK*

This Company is authorized to issue Five Hundred shares (500) of one Dollar(s) (\$1) par value Common Stock, which shall be designated "Common Shares."

*ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT*

The principal office, if know, or the mailing address of the corporation is:

NAME	HEALTH INCENTIVES 2000, INC.
ADDRESS	5239 LA PLATA DRIVE
CITY, STATE, ZIP	NEW PORT RICHEY, FL 34655

The name and street address if the Initial Registered Agent of this Corporation is:

NAME	FRANCIS X D'AMICO
ADDRESS	5239 LA PLATA DRIVE
CITY, STATE, ZIP	NEW PORT RICHEY, FL 34655

*ARTICLE VI - INITIAL BOARD OF DIRECTORS*

This corporation shall have Two (2) director initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1).

The names and addresses of the initial director(s) of the corporation are as follows:

NAME	FRANCIS X D'AMICO
ADDRESS	5239 LA PLATA DRIVE
CITY, STATE, ZIP	NEW PORT RICHEY, FL 34655
NAME	PAT D'AMICO
ADDRESS	5239 LA PLATA DRIVE
CITY, STATE, ZIP	NEW PORT RICHEY, FL 34655
NAME	
ADDRESS	
CITY, STATE, ZIP	

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ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	FRANCIS X. D'AMICO
ADDRESS	5239 LA PLATA DRIVE
CITY, STATE, ZIP	NEW PORT RICHEY, FL 34655
NAME	PAT D'AMICO
ADDRESS	5239 LA PLATA DRIVE
CITY, STATE, ZIP	NEW PORT RICHEY, FL 34655
NAME	
ADDRESS	
CITY, STATE, ZIP	

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation the 11<sup>th</sup> Day of July, 2000

Francis X. D'Amico (Seal)  
Pat D'Amico (Seal)  
\_\_\_\_ (Seal)

STATE OF FLORIDA )

SS

COUNTY OF PINELLAS )

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally  
FRANCIS X. D'AMICO / PATRICIA D'AMICO

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that he/she executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 11 Day of July, 2000

(Notary Seal)  
DAVID L. GREENFIELD  
COMMISSION #CC654328  
EXPIRES JUNE 10, 2001

[Signature]  
(Notary Public, State of Florida At Large)

CERTIFICATE AND ACKNOWLEDGMENT  
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT  
OF

HEALTH INCENTIVES 2000, INC.  
(name of corporation)

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TALLAHASSEE, FLORIDA

Pursuant to Florida Statutes Sections 48.091 and 607.034, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with  
is registered office as indicated in the Articles of Incorporation at:

5239 LA PLATA DRIVE

NEW PORT RICHEY, FL 34655


has named

FRANCIS X. D'AMICO

located at the aforesaid address, as its Registered Agent to accept service of process  
within the state.

ACKNOWLEDGMENT

Having been named to accept service of process for the above stated corporation at  
the place designated in this certificate, I hereby accept to act in this capacity, and agree  
to comply with the provisions of Florida Law in keeping open said office.

x   
(registered agent)