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OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Promotion Health Plan INC.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in ☒ Pick up time \_\_\_\_\_ ☒ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RECEIVED  
TALLAHASSEE, FLORIDA  
01 MAY 22 PM 3:07  
TALLAHASSEE, FLORIDA  
SUFFICIENCY OF FILING

FILED  
01 MAY 22 AM 8:09  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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-05/23/01--01003--005  
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Examiner's Initials

23  
1/4

**ARTICLES OF INCORPORATION**  
**FOR**  
**PROMOTION HEALTH PLAN INC.**

**FILED**  
01 MAY 22 AM 8:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

**PROMOTION HEALTH PLAN INC.**

**ARTICLE II PRINCIPAL OFFICE**

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

**175 FONTAINEBLEAU BLVD: STE: 2-D-4**  
**MIAMI, FLORIDA 33172**

**ARTICLE III NATURE**

This corporation may engage in or transact any all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, county, territory or nation.

**ARTICLE IV CAPITAL STOCK**

The maximum number shares of stock that this corporation is authorized to have outstanding at any one time is **100** shares of common stock having a par value of **\$1.00** per share.

**ARTICLE V TERM OF EXISTENCE**

This corporation shall exist perpetually.

**ARTICLE VI INITIAL OFFICERS/DIRECTORS**

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

**OMAR M. MORELL (P)**  
**MANUEL SANCHEZ (P)**  
**175 FONTAINEBLEAU BLVD: STE: 2-D-4**  
**MIAMI, FLORIDA 33172**

**ARTICLE VII INCORPORATOR(S)**

The name(s) and address(es) of the Incorporator(s) to the Article of Incorporation are:

**OMAR M. MORELL (P)  
MANUEL SANCHEZ (P)  
175 FONTAINEBLEAU BLVD: STE: 2-D-4  
MIAMI, FLORIDA 33172**

**FILED**  
01 MAY 22 AM 8:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



\_\_\_\_\_  
Signature of Incorporator

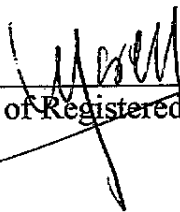
05/21/01  
\_\_\_\_\_  
Date

**ARTICLE VIII REGISTERED AGENT**

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

**OMAR M. MORELL  
175 FONTAINEBLEAU BLVD: STE: 2-D-4  
MIAMI, FLORIDA 33172**

Having been named as registered and to accept service of process for the above started 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.



\_\_\_\_\_  
Signature of Registered Agent

05/21/2001  
\_\_\_\_\_  
Date