

P01000104022

TRANSMITTAL LETTER

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

000004648630--4

-10/22/01--01076--011

*****78.75 *****78.75

SUBJECT: HEALTH CARE SYSTEMS INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: JOSEPH BATTAGLIA
Name (Printed or typed)

4340 LISA DR.
Address

LAKE WORTH FL. 33467
City, State & Zip

561 - 969 - 0988
Daytime Telephone number

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

2228-2544
W01-24498

FILED
2001 OCT 26 PM 3:15
SECRETARY OF STATE
TALLAHASSEE FLORIDA

15
10/26/01



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

FILED

2001 OCT 26 PM 3: 15

SECRETARY OF STATE
TALLAHASSEE FLORIDA

October 23, 2001

JOSEPH BATTAGLIA
4340 LISA DRIVE
LAKE WORTH, FL 33467

SUBJECT: HEALTH CARE SYSTEMS INC.
Ref. Number: W01000024498

We have received your document for HEALTH CARE SYSTEMS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden
Document Specialist
New Filings Section

Letter Number: 701A00058289

ARTICLES OF INCORPORATION

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

FILED

2001 OCT 26 PM 3: 15

ARTICLE I NAME

The name of the corporation shall be:

UNITED HEALTH CARE SYSTEMS INC.

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4340 LISA DR. LAKE WORTH
FL. 33467

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROFIT SALES

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

PRES. MR. JOSEPH BATTAGLIA
4340 LISA DR.
LAKE WORTH FL. 33467

ARTICLE VI REGISTERED AGENT

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

Pres. Mr. Joseph Battaglia PRES. MR. JOSEPH BATTAGLIA
4340 LISA DR.
LAKE WORTH FL. 33467

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JOSEPH BATTAGLIA

4340 LISA DR.
LAKE WORTH FL. 33467

Pres. Mr. Joseph Battaglia Pres. MR. JOSEPH BATTAGLIA

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

Joseph Battaglia
Signature/Registered Agent

10-24-01
Date

Joseph Battaglia
Signature/Incorporator

10-24-01
Date