Division of Corporations

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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)935-3940 Fax Number : (516)935-3088 Phone

FLORIDA PROFIT CORPORATION OR P.A.

Karen Wolchuck Sher Health Care Consulting Company

Certificate of Status	1
Certified Copy	0
Page Count	03 (L
Estimated Charge	₹78.75

1/16/02

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Karen Wolchuck Sher Health Care Consulting Company

ARTICLE II PRINCIPAL OFFICE

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

Karen Wolchuck Sher Health Care Consulting Company 8651 Maidstone Court Largo, FL 33777

ARTICLE III SHARES

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

1000 Shares at \$1.00 Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

Karen Wolchuck Sher 8651 Maidstone Court Largo, FL 33777 FILED

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SECHLIARY OF STATE
ANASSEE FE GRIDA

Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-516-935-3940

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HUBCO INCORPORATIONS

PAGE 03

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ARTICLES V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Karen Wolchuck Sher 8651 Maidstone Court Largo, FL 33777

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

16th day of Jan 2002.

Karen Wolchuck Sher - Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1.	The na	ame o	f the	corporation	_{is} Karen	Wolchu	ck Sher	Health	Care	Consult	ing C	ompany
				x								

7.	The	name	anđ	address	ofti	e registere	d agent and	l office i	8:
				444	~~ ~	VA YOU'S DISTRIB		T D.T.T.A. I	

Karen Wolchuck Sher						
Name	_					
8651 Maidstone Court						
(P.O. Box or Mail Drop Box NOT Acceptable)	_					
Largo, FL 33777	_					
(City / State / Zin)						

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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Karen Wolchuck Sher

SIGNATURE

Jan 16, 2002

(Date)