

PO2000107561

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000208222 8)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 205-0381

From: Account Name : ACE INDUSTRIES, INC.
Account Number : 070744001530
Phone : (305) 358-2571
Fax Number : (305) 373-7718

FILED
2002 OCT -4 AM 9:40
TALLAHASSEE FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

ULTIMATE HEALTH PARTNERS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

10/7/02 10/4/02

H02-208222

FILED

Articles of Incorporation

2002 OCT -4 AM 9:40

Article 1: Name of Corporation: **ULTIMATE HEALTH PARTNERS, INC.**

DEPT. OF STATE
TALLAHASSEE FLORIDA

Address of Corporation: **#2 FIRESTONE CIRCLE
WEST PALM BEACH, FLORIDA 33401**

Article 2: Capital Stock: The number of shares which the corporation has authorized to be outstanding at any one time is **100**, with a par value of **\$10.00**.

Article 3: **REGISTERED AGENT: FRED VILLARI**

**REGISTERED OFFICE: #2 FIRESTONE CIRCLE
WEST PALM BEACH, FLORIDA 33401**

*I am familiar with and hereby accept the duties and responsibilities as Registered Agent for said corporation.



Signature of Registered Agent

Article 4: The Board of Directors are: (Board of Directors is NOT REQUIRED).
First listed is President, Second is Vice President, then Secretary/Treasurer.

1. **LEE EFFENSON (P, S), 818 E. COLONIAL DR., ORLANDO, FLORIDA 32803**
2. **FRED VILLARI (T), #2 FIRESTONE CIRCLE, WEST PALM BEACH, FL 33401**
- 3.

Article 5: The NAME and ADDRESS of the INCORPORATOR is:

**LEE EFFENSON
818 E. COLONIAL DR.
ORLANDO, FLORIDA 32803**

In witness whereof, I have subscribed my name:



Signature of Incorporator

H02-208222