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Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

HEALTH SOURCE PLUS INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

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SECRETARY OF STATE
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ARTICLES OF INCORPORATION

OF

ARTICLE 1 - NAME OF CORPORATION

The name of the corporation is HEALTH SOURCE PLUS INC.

ARTICLE II - NATURE OF BUSINESS

The corporation is authorized to conduct any lawful business in the State of Florida which is not prohibited by law, rule or regulation.

ARTICLE III - CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding is 1,000 (One Thousand) shares of COMMON STOCK, each share having a par value of \$1.00 (One Dollar). Said authorized shares may be divided into voting and nonvoting shares before issuance by election of the board of directors: provided, however, that in the event such designation is not specifically made by the Board of Directors, said stock shall be voting.

Authorized Capital Stock may be paid for in cash, services or property at a just value to be fixed by the Board of Directors of this Corporation at any regular or special meeting.

ARTICLE IV - INITIAL CAPITAL

The amount of capital with which this corporation shall begin business is \$1,000.00 (One Thousand Dollars.)

ARTICLE V - TERM OF EXISTENCE

The corporation shall have a perpetual existence.

Prepared by: Time Financial Service, Inc. 2400 High Ridge Road #103 Boynton Beach, Florida 33426 Telephone: (561) 736-8448 PILED

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ARTICLE VI - ADDRESS

The initial address of the principal office of the corporation is to be at 10 Ridge Blvd, Ocean Ridge, Florida 33435-6225.

The Board of Directors may from time to time designate such other address and place for the principal office of this corporation as it may see fit.

ARTICLE VII - RESIDENT AGENT

In pursuance of Chapter 48.091. Florida Statutes, the following is submitted in compliance with said act:

Health Source Plus, desiring to organize under the laws of the State of Florida with it's principal office as indicated in the Articles of Incorporation in the City of Ocean Ridge, County of Palm Beach, Has Named Gary Bello, located at 10 Ridge Blvd, Ocean Ridge, Florida 33435-6225 as it's Agent to accept service of process within this 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 said article, relative to keeping said office open.

Gary Bello

FILED

ARTICLE VIII - DIRECTORS

The corporation shall have TWO (2) directors initially. The number of Directors may be increased or diminished from time to time by the By-Laws, BUT shall never be less than one.

ARTICLE IX - INITIAL DIRECTORS

The name and address of the first officers and Board of Directors of this corporation, who shall hold office until their successor is elected and have qualified is as follows:

NAME	OFFICE	ADDRESS
Gary Bello	President/CEO	10 Ridge Blvd Ocean Ridge, Florida 33435-6225
Donna Bello	Secretary/ Treasurer	10 Ridge Blvd Ocean Ridge, Florida 33435-6225

ARTICLE X - SUBSCRIBERS

The name and address of the subscribers to these Articles of Incorporation, the number of shares each agrees to take and the value of consideration therefore are as follows:

NAME	ADDRESS	NUMBER OF SHARES	AMOUNT
Gary Bello SS# 155-40-7052 & Donna Bello SS# 142-42-1660	10 Ridge Blvd, Ocean Ridge, Florida 33435-6225	1,000	\$1,000.00

ARTICLE XI - EFFECTIVE DATE

These Articles of Incorporation shall be effective on the 4-7-2003

President/CEO

Gary Bello

Secretary/Treasurer

STATE OF FLORIDA COUNTY OF PALM BEACH

BEFORE ME, the undersigned Notary, Public, personally appeared <u>Gary Bello & Donna Bello</u> known to me personally to be the individuals described herein and first being sworn, executed the foregoing Articles of Incorporation and acknowledge before me that they executed the same for the purposes therein stated. The foregoing instrument was acknowledged before me this date by:

Gary Bello & Donna Bello, who are personally known to me, and who did take an oath.

WITNESS, my hand and official seal in the County and State named above this 774

APNI 2003.

Fred H. Yonkee

MY COMMISSION # CC933467 EXPIRES

October 14, 2004

BOHORD THRU TROY FAIN INSURANCE, INC.