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Division of Corporations

Fax Number : (850)205-0381

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.

FLAGLER HEALTH CARE, INC.

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ARTICLES OF INCORPORATION OF

TALLAHASSEE FLORIDA

FLAGLER HEALTH CARE, INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida and all rights duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

ARTICLE I

The name of the Corporation shall be:

FLAGLER HEALTH CARE, INC.

4476 W FLAGLER ST. MIAMI, FL 33134 ARTICLE TI

This Corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

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

ARTICLE IV

The aggregate number of shares which this corporation shall have authority to issue is the total of 100 shares, having an individual par value of \$1.00 each, and shall be only Common class of stock on this corporation.

ARTICLE V

The name and address of the initial registered agent, registered office, and principal office of this corporation shall be:

TANIA MARTINEZ 4746 W FLAGLER STREET MIAMI, FL 33134

ARTICLE VI

The initial Board of Directors shall consist of a total of one person and the names of the person who is to serve as initial directors is:

TANIA MARTINEZ

PRESIDENT/TREASURER

ARTICLE VII

The name and address of the incorporator executing these Articles of Incorporation is:

TANIA MARTINEZ 13831 SW 28TH STREET MIAMI, FL 33175

TANIA MARTINEZ

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TALLAHASSEE FLORIDA

TALLAHASSEE FLURIDA
In pursuance of Chapter 607.34 Florida Statutes, the following is submitted, in compliance with said Act:
First-That FLAGLER HEALTH CARE, INC. (Name of Corporation)
desiring to organize under the laws of the State of Florida with
its principal office, as indicated in the Articles of Incorporation
at the City of MIAMI County of MIAMI-DADE
State of Florida has named TANIA MARTINEZ (Name of Register Agent)
located at 4746 W FLAGIER ST (Street address and number of building, Post Office Box address not acceptable)
City of MIAMI , County of MIAMI-DADE
State of Florida, as its agent to accept service of process within this state.
ACKNOWLEDGMENT: (MUST BE SIGNED BY DESIGNATED AGENT)
Having been named to accept service of process for the above stated corporation, at place designated in this certificate. I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

TANIA MARTINEZ

Register Agent