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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

FLORIDA PROFIT CORPORATION OR P.A.

florida state health care group, inc.

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 04 |
| Estimated Charge | \$78.75 |

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DIVISION OF CORPORATIONS

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ARTICLES OF INCORPORATION

OF

FLORIDA STATE HEALTH CARE GROUP, 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 law of the State of Florida.

ARTICLE I

The name of the corporation shall be:

FLORIDA STATE HEALTH CARE GROUP, INC

ARTICLE II

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

The general nature of the business and objects and purposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- 1) Transact any and all lawful business
- 2) Said corporation shall further have powers
To have perpetual succession by it's corporate

Name:

FLORIDA STATE HEALTH CARE GROUP, INC

ARTICLE IV

The aggregate number of shares, which the corporation shall have authority to issue, is the total sum of 1000 shares, having an individual per value of \$10.00

Unless otherwise stated in these article, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

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ARTICLE V

The street of the initial registered office and the name of the initial Registered Agent of this corporation shall be:

ALEIDO E. PEREZ
9940 SW 48TH STREET
MIAMI, FLORIDA 33165

The principal office shall be:

9940 SW 48TH STREET
MIAMI, FLORIDA 33165

ARTICLE VI

The initial Board of Directors shall consists of s total of TWO (2) person, and the name and address of the person who is to serve as an initial director is:

ALEIDO E. PEREZ
9940 SW 48TH STREET
MIAMI, FLORIDA 33165

PRESIDENT

The shares of each shareholders and registered agent to the Certificate of Incorporation are as follows:

ALEIDO E. PEREZ
9940 SW 48TH STREET
MIAMI, FLORIDA 33165

100%

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

ALEIDO E. PEREZ
9940 SW 48TH STREET
MIAMI, FLORIDA 33165

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IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 18th days of May of 2004.-

ALEIDO E. PEREZ
President

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provision of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, Submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. - The name of the Corporation is:

FLORIDA STATE HEALTH CARE GROUP, INC

2. - The name and address of the registered agent and office is:

**ALEIDO E. PEREZ
9940 SW 48TH STREET
MIAMI, FLORIDA 33165**

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

Signature:

Aleido E. Perez
President

Dated: May 18th of 2004. -

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