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TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Health S	pecialists, Inc.			
	(PROPOSED CORPORA)	FE NAME – <u>MUST INCLI</u>	<u>UDE SUFFIX</u>)	
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
\$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: Ken Arena Accounting & Tax Service				
	Name (Printed or typed)		
1318 E. Lumsden Road Address				
Address				
Brandon, FL 33511 City, State & Zip				
(813) 341-2501 Daytime Telephone number				

NOTE: Please provide the original and one copy of the articles.

THE MINE

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Health Specialists, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1411 John Moore Road Brandon, FL 33511

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to engage in any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

The corporation is authorized to have one thousand (1,000) shares of common stock - each having a par value of \$.01 per share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

President and Director:

Gail L. Kujawski, 122 W. Fort Dade Avenue, Brooksville, FL 34601

VP, Secy, Treas, and Director:

Walter Vierra, 103 Hidden Lake Drive, Brandon, FL 33511

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Ken Arena, EA 1318 E. Lumsden Road Brandon, FL 33511

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Walter Vierra 1411 John Moore Road Brandon, FL 33511

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator

10/13/0 +

10/13/04

Date

MSTB ALLON