

PO4000142806

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.

(((H04000206848 3)))

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 : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

**FLORIDA PROFIT CORPORATION OR P.A.
HEALTH INTELLIGENCE SYSTEMS, INC.**

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

FILED
04 OCT 15 AM 7:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Electronic Filing Menu

Corporate Filing

Public Access Help

HA 10/18/04

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be: **Health Intelligence Systems, Inc.**

ARTICLE II PRINCIPAL OFFICE/ADDRESS

The mailing address of business of this corporation shall be:

**105 Highway To Bay Blvd
Safety Harbor, FL 34695-5107**

ARTICLE III SHARES

The number of shares of stock this corporation is authorized to have outstanding at any one time is:

**One-Thousand (1,000) Shares
Common Stock**

ARTICLE IV INITIAL REGISTERED AGENT

The name and Florida street address of the initial registered agent are:

**Ronald Carl Heffner
105 Highway To Bay Blvd
Safety Harbor, FL 34695-5107**

ARTICLE V INCORPORATOR

The name and mailing address of the incorporator to these Articles of Incorporation are:

**Ronald Carl Heffner
105 Highway To Bay Blvd
Safety Harbor, FL 34695-5107**

ARTICLE VI OFFICERS

The officers of the corporation are:

**Ronald Carl Heffner: President/Secretary
Treasurer**



Signature/Incorporator

10/15/2004

Date

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 registered agent.



Signature/Registered Agent

10/15/2004

Date

SECRETARY OF STATE
TALLAHASSEE FLORIDA

04 OCT 15 AM 7:47

FILED