PO5000128/174

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cil	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Onl	y // ,



400046957514

02/23/05--01046--024 **78.75

RECEIVED

05 FEB 23 PM 2: 32

WISION AND SEATIONS

OS FEB 23 AM II: 28
TALLAHASSEE, FISIALE

•		
OFFICE USE ONLY(DOCUMENT #)		
LAZARUS CORPORATE FILIN	VG SERVI <u>CE</u>	
3320 S.W. 87 AVENUE		
MIAMI, FLORIDA (305)552-5973		
		office use only
1	•	
CORPORATION NAME(S) & DO	OCUMENT NUMI	BER(S) (if known):
1. CONSOLIDATE (Corporation Name)	D HEAL	TH TRANSBAINDNY
2. L MC (Corporation Name)		(Document #)
3.		
, (Corporation Name)	, , , , , , , , , , , , , , , , , , , ,	(Document #)
4. (Corporation Name)		(Document #)
Walk in Pick up time	2.00	Certified Copy
Mail out Will wait	Photocopy	Certificate of Status
NEW FILINGS	AMENDAL	PAITS
Profit	AMENDMENTS Amendment	
NonProfit	Resignation of R.A., Officer/Director	
. Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	
Other	Merger	
		,
OTHER FILINGS	REGISTRATIO	
Annual Report	QUALIFICATIO Foreign	
Fictitious Name	Limited Partnersh	oip
Name Reservation	Reinstatement	
ŀ	Trademark	
1	Other .	Fiv. to Taitinfo

Examiner's Initials

CR2E031(9/92)



ARTICLES OF INCORPORATION

OF

CONSOLIDATED HEALTH TRANSPORTATION, INC.

The undersigned incorporator (s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt (s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: CONSOLIDATED HEALTH TRANSPORTATION, INC..

The principal place of this corporation shall be:

PMB 351

10773 N.W.58 St. Miami Fl 33178

ARTICLE II NATURE OF BUSINESS

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

ARTICLE III CAPITAL STOCKS

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding any one time is: 100 shares x 5.00 Per Value

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name (s) and street address (Es) of initial officer(s) and directors (s), if any who shall hold office the first year of the corporation's existence or until their successor (s) is (are) elected, is (are

PRESIDENT & TREASURER VICE PRESIDENT & SECRETARY

Frank Marin Evelyn Marin

PMB 351. Avenida Ruiz Pineda 10773 N.W. 58 St. Presidencia Claudia Miami Fl 33178 Piso 2 Apt. A-2

Colinas del Neveri, Puerto la Cruz

Estado Anzuategui

Venezuela

ARTICLE VI INCORPORATOR (S)

The name(s) and street address (es) of the incorporator(s) to this articles of incorporation is (are)

Frank Marin PO Box 10773 N.W. 58 St. Miami Fl. 33178 IN WITNESS WHEREOF, the undersigned incorporator (s) has (have) executed these Articles of Incorporation's this 11th day of January, year 2001.

Signature (s) of incorporator (s)

Frank Marin

:

CERTIFICATE OF DESIGNATION

REGISTERED AGENT / REGISTERED OFFICE

Pursuant to provisions of section 607.325, 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: Consolidated Health Transportation, Inc.
- 2. The name and address of the registered agent and office is:

Jorge Alvarez (Alvarez Tagle & Associates)

15511 S.W. 152 Lane

PO Box Not Acceptable)

Miami FI, 33187

(City/ state/ Zip)

Signature_

(Corporate officer)

Title Treasurer- Secretary Date

HAVING BEEN NAMED TO ACCEPT SERVICE OR PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY, WITH THE PROVISSION OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATION OF SECTION 607.325, FLORIDA STATURS

SIGNATURE

DATE: \$\\ 2/2//60-

FILED 05FEB 23 AMII: 28 SECRETARY OF STATE TALLAHASSEE, FLORID,