

PO5000104003

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

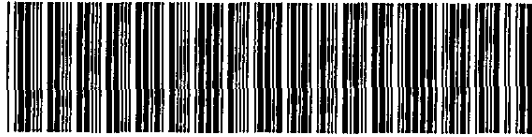
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2005 JUL 25 PM 4: 13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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05 JUL 25 PM 4: 14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Community Healthcare Alliance, Inc.

- Art of Inc. File _____
- LTD Partnership File _____
- Foreign Corp. File _____
- L.C. File _____
- Fictitious Name File _____
- Trade/Service Mark _____
- Merger File _____
- Art. of Amend. File _____
- RA Resignation _____
- Dissolution / Withdrawal _____
- Annual Report / Reinstatement _____
- Cert. Copy _____
- Photo Copy _____
- Certificate of Good Standing _____
- Certificate of Status _____
- Certificate of Fictitious Name _____
- Corp Record Search _____
- Officer Search _____
- Fictitious Search _____
- Fictitious Owner Search _____
- Vehicle Search _____
- Driving Record _____
- UCC 1 or 3 File _____
- UCC 11 Search _____
- UCC 11 Retrieval _____
- Courier _____

Signature _____

Requested by: SP
Name _____ Date 7/25/05 Time 3:40

Walk-In _____ Will Pick Up _____

ARTICLES OF INCORPORATION

OF

COMMUNITY HEALTHCARE ALLIANCE, INC.

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2005 JUL 25 PM 4: 13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), 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:

COMMUNITY HEALTHCARE ALLIANCE INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2436 Olson Lane
Jacksonville, Fl 32210

ARTICLE III CAPITAL STOCK

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

One Hundred

ARTICLE IV INITIAL REGISTRATION AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Latoya Williams
2436 Olson Lane
Jacksonville, Fl 32210

ARTICLE V - OFFICERS

The following individuals are officers of this Corporation:

Latoya Williams, President
2436 Olson Lane
Jacksonville, Fl 32210

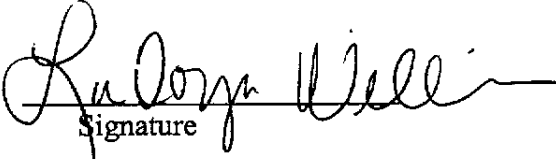
President has 100% of shares .

ARTICLE VI INCORPORATORS

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

Latoya Williams
2436 Olson Lane
Jacksonville, Fl 32210

The undersigned incorporator has executed these Articles of Incorporation this
21st day of July 2005


Signature

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

Pursuant to the provisions of sections 607.0501 and 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.

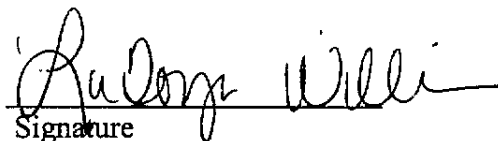
The name of the corporation is:

COMMUNITY HEALTHCARE ALLIANCE, INC.

The name and address of the registered agent and office is:

Latoya Williams
2436 Olson Lane
Jacksonville, Fl 32210

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

7.21.2005
Date