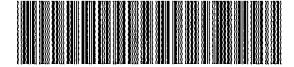
## P05000/58322

(Re	equestor's Name)	
(Ad	dress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(		,
(Do	ocument Number)	· · · · · ·
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



800061677978

12/01/05--01022--001 \*\*70.00

05 DEC -1 AM 8: 26

## **COVER LETTER**

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

SUBJECT: TURNER + HARRIS HEDICAID WAIVER SERVICS, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUPPLY) Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 **\$78.75** \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED SANDRA HARRIS
Name (Printed or typed)

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

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:  US DEC - 1 AM 8: 36
The name of the corporation shall be:  TORNER + HARRIS HEDICAID WATUER SERVICESSELVEY OF STATE  ARTICLE II PRINCIPAL OFFICE  05 DEC - 1 AM 8: 26  LLAHASSEE, FLORIDA
ADMICI DE LA CARROLLA
The principal place of business/mailing address is:
1340 WOODBINE ST CLEARWATER, FL 33753
ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
ANY LEGAL PURPOSE INCLUDING BUT NOT LIKITED TO
MEDICAL SERVICES
ARTICLE IV SHARES The number of shares of stock is:
100 SHARES NO PAR VALUE
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
List name(s), address(es) and specific title(s):
ARTICLE VI REGISTERED AGENT
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
SHANDRA HARRIS
1400 BYRAM DRIVE
CLEARWATER, FL 33755
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:
SHANDRA HARRIS
1400 BYRAU DRIVE
CLEARWATER, FL 33755
**************************************
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity
Shandra Herre 11/28/05
Signature/Registered Agent Date

Signature/Incorporator