

## Florida Department of State

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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/NON PROFIT CORPORATION

ADVANCE MEDICAL HEALTH CARE INC.

Certificate of Status	0
Certified Copy	.1
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# ARTICLES OF INCORPORATION LAHASSEE FLORIDA

#### **OF**

#### ADVANCE MEDICAL HEALTH CARE INC.

#### ARTICLE I. NAME

The name of this corporation is:

#### ADVANCE MEDICAL HEALTH CARE INC.

#### ARTICLE H. DURATION

This corporation shall have perpetual existence, unless sooner dissolved in accordance with the laws of the State of Florida.

#### ARTICLE III. PURPOSE

This corporation is organized for the purpose of transacting any and all business permitted under the laws of the United States of America and the State of Florida.

#### ARTICLE IV. CAPITAL STOCK

This corporation is authorized to issue FIVE HUNDRED (500) shares of COMMON STOCK, with a par value of TEN (\$10.00) dollars each.

#### ARTICLE V. AMOUNT OF CAPITAL

The amount of capital with which this corporation will begin business is not less than FIVE THOUSAND (\$5,000.00) DOLLARS.

#### ARTICLE VI. PREEMPTIVE RIGHTS.

Every shareholder upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of (fractional shares) at the price at which it is offered to others.

# ARTICLE VII. INITIAL REGISTERED OFFICE, AGENT AND PRINCIPAL OFFICE

The street address of the initial registered office of this corporation is: 5323 SW 8<sup>TH</sup> STREET MIAMI, FL 33134

The name of the imitial registered agent of this corporation is: JOHN K. LENIHAN
The corporation principal office shall be: 5323 SW 8<sup>TH</sup> STREET
MIAMI, FL 33134

#### ARTIČLE VIII. INITIAL BOARD OF DIRECTORS AND OFFICERS

This corporation shall have (ONE) directors(s), initially. The number of Directors may be either increased or diminished from time to time by the bylaws but shall never be less than ONE (2).

The name(s) and address(es) of the initial Board if Director(s) of this corporation is(are):

JOHN K, LENTHAN 5323 SW 8<sup>TH</sup> STREET MIAMI, FL 33134 PRESIDENT, SEC. TREAS. & DIRECTOR

#### ARTICLE IX. IDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

#### ARTICLE X. INCORPORATORS

The name and address of the persons(s) signing these Articles of Incorporation is (are):

JOHN K. LENIHAN 5323 SW 8<sup>TR</sup> STREET MIAMI, FL · 33134 IN WITNESS THEREOF, we (I), being all of the original subscriber(s) and incorporator(s) of this Corporation for the purpose of forming a Corporation, do make and file these Articles of Incorporation with the Secretary of the State of Florida, and accordingly set our hands and seal this 6th day of April 2006.

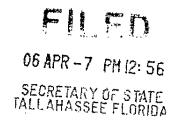
STATE OF FLORIDA COUNTY OF MIAMI-DADE

To me well know and know to be the person(s) described in and who executed these foregoing Articles of Incorporation.

WITNESS my hand and official seal in the City of Miami, County of Miami-Dade and State of Florida, this  $6^{th}$  day of April 2006.

Notary Hublic

FELIX M. CACEARSI MY COMMISSION & OD 1 1755/ EXPERTMY R. 2018 BOOLER True Please Name & Commission



CERTIFICATE DESIGNATING DOMICILE FOR THE SERVICE OF PROCESS WITHIN THE STATE OF FLORIDA NAMING AGENT WHO PROCESS MAY BE SERVED

In pursuance of Chapter 48,091, Florida Statutes, the following is submitted, in Compliance with said act:

First. - ADVANCE MEDICAL HEALTH CARE INC.

Qualified to do business under the laws of the State of Florida with its principal

Office at 5323 SW 8<sup>TH</sup> STREET MIAMI, FL 33134

Has appointed: JOHN K. LENIHAN

5323 SW 8<sup>TH</sup> STREET MIAMI, FL 33134

as its agent to accept service of process within this State.

#### ACKNOWLEDGMENT

Having been named to accept service of process for the above stated Corporation At place designated in this Certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of said Act, relative to keeping open said office.

JOHN K. LENIHAN

Sworn to and subscribed before me,

This 6th day of April 2006.

Notary Pus

FELIX M. GACERES

WY COMMISSION # DD 117257

RYPRES May 21, 2007