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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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2006 DEC 12 AM 11:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C.D. 12-13

EXPRESS CORPORATE FILING SERVICE INC.

Requestor's Name

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CORAL GABLES, FL 33134 (305) 444-4994

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**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. CYPRESS HEALTH PARTNERS, INC.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

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NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF INCORPORATION**  
**OF**

FILED

2006 DEC 12 AM 11:18

**CYPRESS HEALTH PARTNERS, INC**  
**EFFECTIVE DATE: JANUARY 01, 2007**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**ARTICLE I NAME**

The name of the corporation shall be:

CYPRESS HEALTH PARTNERS, INC

**ARTICLE II PRINCIPAL OFFICE**

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

6423 Collins Avenue  
Suite 1008  
Miami Beach , Florida 33141

**ARTICLE III SHARES**

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

Ten thousand shares (10,000 )

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

Eddy F. Fernandez  
6423 Collins Avenue  
Suite 1008  
Miami Beach, Florida 33141

**ARTICLE V INCORPORATOR**

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

Eddy F. Fernandez

6423 Collins Avenue, Suite 1008

Miami Beach, Florida 33141

The undersigned incorporator has executed these Articles of Incorporation this 1<sup>h</sup>  
day of December 2006

Eddy Fernandez  
Signature

**ARTICLE VI- DIRECTOR(S)**

The name(s) and street address(es) of the director(s) to these Article of Incorporation is (are):

Eddy F Fernandez  
Name

6423 Collins Ave #1008  
Address

Miami Beach Fl 33141  
City, State, Zip Code

Ernesto J. Perez M.D.  
Name

1450 GTH Street SE.  
Address

Winter Haven Fl 33880  
City, State, Zip Code

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

Articles of Incorporation  
Filing Fee-\$35

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

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 STATUS 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.

  
\_\_\_\_\_  
Registered Agent Signature

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA