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| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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SECRETARY OF STATE HAT HER BEGGE TALLAHASSEE, FLORIDA TO ACREOWLEDGE SUFFICIERCY OF FILING

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## LAZARUS CORPORATE FILING SERVICE

| 3320 SW 87 <sup>TH</sup> AVENUE  |   |
|----------------------------------|---|
| MIAMI, FL 33165 (305) 552-59     | 73  |
|                                  | Office Use Only                                   |
| CORPORATION NAME(S) & DOCUME     | ENT NUMBER(S), (if known):                        |
| C& B HEAD                        | ITH SERVICES, INC.                                |
| (Corporation Name)               | (Document #)                                      |
| 2.                               |   |
| (Corporation Name)               | (Document #)                                      |
| 3.                               |   |
| (Corporation Name)               | (Document #)                                      |
|                                  |   |
| 4. (Corporation Name)            | (Document #)                                      |
| Walk in Pick up time 3           | Cartified Conv                                    |
|                                  | .06 Certified Copy                                |
| Mail out Will wait               | Photocopy   |
| NEW FILINGS                      | <u>AMENDMENTS</u>                                 |
| Profit                           | ☐ Amendment                                       |
| Not for Profit                   | Resignation of R.A., Officer/Director             |
| Limited Liability  Domestication | Change of Registered Agent Dissolution/Withdrawal |
| Other                            | Merger  |
| OTHER FILINGS                    | REGISTRATION/QUALIFICATION                        |
|                                  | _   |
| Annual Report Fictitious Name    | Foreign Limited Partnership                       |
|                                  | Reinstatement                                     |
|                                  | Trademark   |
| •                                | Other .   |
|                                  | •   |

Examiner's Initials

CR2E031(7/97)

#### ARTICLES OF INCORPORATION

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TALLAHASSON OF STATE
the Florida Business CHID

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

#### ARTICLE I - NAME

The name of the corporation shall be:

C & B HEALTH SERVICES, INC.

#### ARTICLE II - PRINCIPAL OFFICE

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

5505 NW 201 TERRACE MIAMI GARDENS, FL 33055

#### **ARTICLE III - SHARES**

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

ONE HUNDRED SHARES AT \$1.00 PER VALUE

#### ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

SONIA M. CANTELI 5505 NW 201 TERRACE MIAMI GARDENS, FL 33055

#### ARTICLE V - INCORPORATOR

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

SONIA M. CANTELI 5505 NW 201 TERRACE MIAMI GARDENS, FL 33055

The undersigned incorporator has executed these Articles of incorporation this 11 day of JANUARY, 2007.

Signature SONIA M. CANTELI

ARTICLE VI - DIRECTOR (S)

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

PRESIDENT VICE-PRESIDENT SECRETARY TREASURER SONIA M. CANTELI 5505 NW 201 TERRACE MIAMI GARDENS, FL 33055

100%

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related 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
SONIA M. CANTELI

Witness my hand and official seal at Hialeah, Dade county, Florida, this 11 days of JANUARY Public, State of Florida

My Commission Expires: