

PO70000 74346

(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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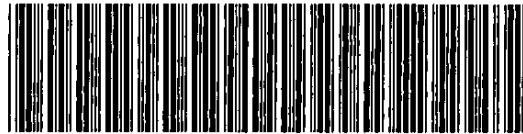
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2007 JUN 26 PM 2:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Hampton JUN 27 2007

COVER LETTER

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

SUBJECT: HYGEIA RX TENENS INC.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: LISA MOWATT
Name (Printed or typed)

12921 NW 2ND ST
Address

PEMBROKE PINES, FL 33028
City, State & Zip

(954)549-3762
Daytime Telephone number

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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

HYGEIA RX TENENS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

PO BOX 260483
PEMBROKE PINES, FL 33026

12921 NW 2ND ST
PEMBROKE PINES, FL 33028

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO CONDUCT GENERALLY THE BUSINESS OF HEALTH-CARE STAFFING SERVICES TO INDIVIDUALS, BUSINESSES AND GOVERNMENT ENTITIES AND TO ENGAGE IN ANY ACTIVITY OR BUSINESS INCIDENTAL TO OR RELATED TO THOSE ACTIVITIES.

ARTICLE IV SHARES

The number of shares of stock is:

100 (ONE HUNDRED)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

LISA MOWATT
PO BOX 260483
PEMBROKE PINES, FL 33026
PRESIDENT

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

LISA MOWATT
12921 NW 2ND ST
PEMBROKE PINES, FL 33028

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LISA MOWATT
PO BOX 260483
PEMBROKE PINES, FL 33026

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Lisa Mowatt
Signature/Registered Agent

6/23/07

Date

Lisa Mowatt
Signature/Incorporator

6/23/07

Date