

P08000040742

(Requestor's Name)

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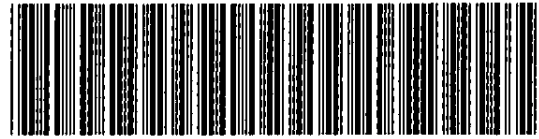
(Business Entity Name)

(Document Number)

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04/18/08--01023--005 **78.75

RECEIVED
08 APR 18 AM 11:52
DIVISION OF CORPORATION

08 APR 22 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

B. McKnight APR 23 2008

W08-19810

ECFS

EXPRESS CORPORATE FILING SERVICE, INC
1000 PONCE DE LEON BLVD., STE: 101
CORAL GABLES, FL 33134
PH: (305)444-4994 FAX: (305)444-4977

OFFICE USE ONLY

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

1. CAS Progressive Health Care 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 18, 2008

EXPRESS CORPORATE FILING SERVICE, INC

SUBJECT: C A S PROGRESSIVE HEALTH CARE INC.
Ref. Number: W08000019810

RECEIVED
08 APR 22 AM 10:37
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for C A S PROGRESSIVE HEALTH CARE INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Becky McKnight
Regulatory Specialist II
New Filing Section

Letter Number: 808A00023412

**ARTICLES OF INCORPORATION
OF
C A S PROGRESSIVE HEALTH CARE INC.**

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:

C A S PROGRESSIVE HEALTH CARE INC.

Article II - Principal Office

The principal place of business shall be:

2365 SW 19TH TER
MIAMI, FL 33145

Article III - Shares

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

ONE THOUSAND (1,000)

Article IV - Purpose

To carry on and engage in any and all lawful business or businesses.

Article V - Initial Registered Agent and Street Address

The name and address of the initial registered agent is:

CARLOS A. SANCHEZ
2365 SW 19TH TER
MIAMI, FL 33145

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 APR 22 AM 10:06

APPROVED
AND
FILED

Article VI – Incorporator(s)

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

NAME	OFFICE	ADDRESS	SHARES
CARLOS A. SANCHEZ	PRESIDENT, REGISTERED AGENT, VICE-PRESIDENT, SECRETARY	2365 SW 19 TH TER MIAMI, FL 33145	100

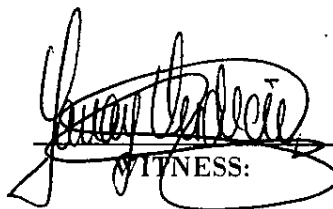
Article VII Directors

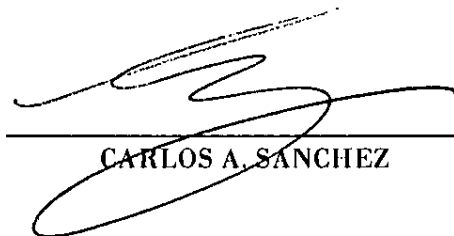
The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

The same as Incorporators.

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this

16TH day of April 2008


WITNESS:


CARLOS A. SANCHEZ

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statute, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the Corporation is: **C A S PROGRESSIVE HEALTH CARE INC.**

2. The name and address of the registered agent and office is:

CARLOS A. SANCHEZ
2365 SW 19TH TER
MIAMI, FL 33145

During been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

x _____ (Seal)
CARLOS A. SANCHEZ

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 APR 22 AM 10: 06

APPROVED
AND
FILED