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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 MAY 30 PM 4:45

EP 6/2/08

## COVER LETTER

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

**SUBJECT:** Florida Health Group, 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:** Bruce Henry

Name (Printed or typed)

7971 SE Hempstead Circle

Address

Hobe Sound, Florida, 33455

City, State & Zip

772.546.2299

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)

### **ARTICLE I NAME**

The name of the corporation shall be:

Florida Health Group, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

8974 SE Bridge Road, Hobe Sound, FL 33455

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Insurance Agency

### **ARTICLE IV SHARES**

The number of shares of stock is:

10,000

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Bruce Henry, 7971 SE Hempstead Circle, Hobe Sound, FL 33455 President  
Donna Stocks, 7971 SE Hempstead Circle, Hobe Sound, FL 33455 Secretary  
Farhad Mottaghi, 3171 Village Blvd. #101, West Palm Beach, FL 33409 Treasurer

### **ARTICLE VI REGISTERED AGENT**

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

Frank Henry, 3624 SW Quail Meadow Trail, Unit E, Palm City, FL 34990

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

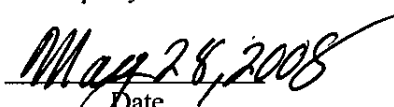
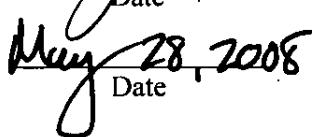
Bruce Henry, 7971 SE Hempstead Circle, Hobe Sound, FL 33455

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08 MAY 30 PM 4:45

\*\*\*\*\*

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

  
\_\_\_\_\_  
Signature/Registered Agent  
  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date  
  
\_\_\_\_\_  
Date