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Division of Corporations

CAPITAL CONNECTION

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To:
Division of Corporations
Fax Number : (850) 617-6381

From:
Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : 120000000257
Phone : (850) 224-8870
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DIVISION OF CORPORATION

FLORIDA PROFIT/NON PROFIT CORPORATION

Affordable Health Options, Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION OF

Affordable Health Options, Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is **Affordable Health Options, Inc.**

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is **5762 Tillman Road, Graceville, FL 32440**

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (100) shares having a par value of (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **Bonnie K. Roberts Attorney at law, 402 North Oklahoma Street, Bonifay, FL 32425**

ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is **Your Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL. 32301.**

ARTICLE VI: OFFICERS & DIRECTORS

The name and address of the initial Officers and Directors of the corporation are:

David Dew, President/ Secretary, 5762 Tillman Road, Graceville, FL 32440

The undersigned has executed these Articles of Incorporation this 5th day of November 2008.

"Your Capital Connection, Inc. by, Christina Fields, Client Representative"

A handwritten signature in cursive script that reads "Christina Fields". The signature is written in dark ink and is positioned below the printed name of the client representative.

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

2008 NOV -5 P 12: 04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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: Affordable Health Options, Inc.

2. The name and street address of the registered agent and office is: Bonnie K. Roberts
Attorney at Law, 402 North Oklahoma Street,
Bonifay, FL 32425

HAVE 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 STATUTES 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.

Bonnie K. Roberts