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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 APR 20 P 2:58

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APR 21 2009
D. A. WHITE

COVER LETTER

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

SUBJECT: PENSA Health Management, 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: R. Scotlen Glambruno

Name (Printed or typed)

837 Baytree Lane

Address

Ponte Vedra Beach, FL 32082

City, State & Zip

904-280-7108

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:

PENSA Health Management, Inc.

ARTICLE II PRINCIPAL OFFICE

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

837 Baytree Lane
Ponte Vedra Beach, FL 32082

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful business.

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

R. Scotlen Giambruno, President and Chief Executive Officer

ARTICLE VI REGISTERED AGENT

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

Deborah J. Giambruno
837 Baytree Lane
Ponte Vedra Beach, FL 32082

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

R. Scotlen Giambruno
837 Baytree Lane
Ponte Vedra Beach, FL 32082

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

Deborah J. Giambruno
Signature/Registered Agent

April 2, 2009
Date

[Signature]
Signature/Incorporator

April 2, 2009
Date

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA