PD 9000057670

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(Address)			
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(Document Number)			
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SECRETARY OF STATE

D.A. WHITE

COVER LETTER

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

SUBJECT:	DCR HEALTH GROUP INC			
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	l 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 CO	PY REQUIRED	
FROM:	CHLOE CLUNIS Name (Printed or typed)			
	1844 SW 102ND WAY Address			
	MIRAMAR, FLORIDA 33025 City, State & Zip			
	305	-608-9108 Felephone number		
	ANDREACLU	NIS@YAHOO.COM	notification)	

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 30, 2009

CHLOE CLUNIS 1844 SW 102ND WAY MIRAMAR, FL 33025

SUBJECT: DCR HEALTH GROUP INC.

Ref. Number: W09000030316

We have received your document for DCR HEALTH GROUP 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):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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) 245-6933.

Dale White Regulatory Specialist II New Filing Section

Letter Number: 709A00022429

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME

The name of the corporation shall be: DCR HEALTH GROUP INC.

文明 JUL -6 P 1: 11

SECRETARY OF STATE TALLAHASSEE. FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

1844 SW 102ND Way MIRAMAR, FI

33025

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HEALTH CONSULTATION

ARTICLE IV SHARES

The number of shares of stock is:

1

INITIAL OFFICERS AND/OR DIRECTORS

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

CHLOE CLUNIS-1844 SW 102ND WAY MIRAMAR, FL 33025 CEO DENEZE CLUNIS- 1844 SW 102ND WAY MIRAMAR FL 33025 MANAGER

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: KEITH MCCRAY-311 NW 78TH TERR BLDG 33/SUITE 205 PEMBROKE PINES FL 33024

ARTICLE VII **INCORPORATOR**

The <u>name and address</u> of the Incorporator is:

KEITH MCCRAY-311 NW 78TH TERR BLDG 33/SUITE 205 PEMBROKE PINES FL 33024

**************************************	*****
Having been named as registered agent to accept service of proce place designated in this certificate, I am familiar with and accept	
agree to act in this copacity	
Kelth Mc/	06/25/09
Signature/Registered Agent	Date
Kelt Mc/_/	06/25/09
Signature/Incorporator	Date