## Florida Department of State

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To:

Division of Corporations

: (850)617-6381 Fax Number

: FLORIDA HEALTHLAW CENTER Account Name

Account Number : 120080000076 : (954)359-0155 Phone Fax Number : (954)358-1611

## FLORIDA PROFIT/NON PROFIT CORPORATION

Bridgepoint Health Solutions, Inc.

Certificate of Status	<u></u> 0
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Estimated Charge	\$70.00

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# ●●◎ Florida Health Law Center

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August 25, 2009

#### **VIA EMAIL**

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Corporate filing for Bridgepoint Health Solutions, Inc.

To Whom It May Concern:

We received your correspondence dated August 24, 2009 regarding the attempted filing of Bridgepoint Health Solutions, Inc. The filing was rejected to the fact that Bridgepoint Health Solutions, LLC is already an existing entire under Florida law.

The principals of both entities are the same individuals and they desire to operate Bridgepoint Health Solutions, Inc. as the entity of choice under Florida law. Therefore, please file the attached Articles of Incorporation for Bridgepoint Health Solutions Inc.

Should you have any questions, please do not hesitate to contact me at your earliest convenience.

Sincerely,

Florida Health Law Center, LLC

Liston E. Radney III

# H09000188377.3

#### 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:

Bridgepoint Health Solutions, Inc.

#### ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 8004 NW 154 Street, Suite 140 Miami Lakes, FL 33016

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful purposes

#### ARTICLE IV SHARES

The number of shares of stock is:

100

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

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

German Brizuela, President, 8004 NW 154 Street, Suite 140, Miami Lakes, FL 33016 Francis Quinones, Vice President, 8004 NW 154 Street, Suite 140, Miami Lakes, FL 33016

#### ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: Florida Health Law Center, LLC 3501 S. University Drive, Suite 10 Davie, FL 33328

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Suzanne Sterling 3501 S. University Drive, Suite 10

Davie, FL 33328

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

Sugasta	
Signature/Registered Agent	Date
Suan Sterlin	
Signature/Incorporator	Date

SECRETARY OF STATE
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