Florida Department of State

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To:

Division of Comporations

Fax Number : (850)617-6381

From:

Account Name : CSH SERVICES, LLC Account Number : 730070000160 Phone : (800)494-3124

: (561)455-9885 Fax Number

FLORIDA PROFIT/NON PROFIT CORPORATION

Healthcare Development Associates Enterprises, Inc.

Certificate of Status	0
Certified Copy	0
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Corporate Filing Menu

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (ProffETARY OF STATE MALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

HEALTHCARE DEVELOPMENT ASSOCIATES ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

777 E ATLANTIC AVENUE, STE 222 DELRAY BEACH, FLORIDA 33483

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,000 COMMON SHARES PAR VALUE \$1.00

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is/are:

PRESIDENT

CECILIA KRONAWITTER

777 E ATLANTIC AVENUE, STE 222

DELRAY BEACH, FLORIDA 33483

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ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

CECILIA KRONAWITTER 777 E ATLANTIC AVENUE, STE 222 DELRAY BEACH, FLORIDA 33483

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

CECILIA KRONAWITTER 777 E ATLANTIC AVENUE, STE 222 DELRAY BEACH, FLORIDA 33483

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.

CECILIA KRONAWITTER / Registered Agent

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