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COVER LETTER

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

SUBJECT: Partner	s in Health and Entertainment M	anagement, Inc.	
	(PROPOSED CORPOR	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles 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
		ADDITIONAL CO	& Certificate of Status
FROM: Dr.	Jaime Huysman		
	Nam	e (Printed or typed)	
305	0 Biscayne Boulevard #605		
		Address	
Mia	mi, FI 33137		
	City	, State & Zip	· · · · · · · · · · · · · · · · · · ·
305	-571 - 9996		
		Telephone number	
	.,	•	
drj@	drjamie.com		
	E-mail address: (to be use	d for future annual report	notification)

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:

Partners in Health and Entertainment Management, Inc.

ARTICLE II PRINCIPAL OFFICE

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

3050 Biscayne Blvd, Suite 605 Miami, FL 33137

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

James D Huysman, President 3050 Biscayne Boulevard #605 Miami, FL 33137

ARTICLE VI REGISTERED AGENT

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

James D Huysman

3050 Biscayne Boulevard #605 Miami, FL 33137

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

James D Huysman

3050 Biscayne Boulevard #605

Miami, FL 33157

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

Signature/Registered Agent

Signature/Incorporator

4 1 10 Date 4 1 10 +