

# P11000088853

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000244987 3)))



H110002449873ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : CSH SERVICES, LLC  
Account Number : 120070000160  
Phone : (800) 494-3124  
Fax Number : (561) 455-9885

11 OCT 10 AM 11:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FLORIDA PROFIT/NON PROFIT CORPORATION  
HERON MEDICAL SERVICES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

RECEIVED  
11 OCT 10 PM 1:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*10/11/11*

## **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:

HERON MEDICAL SERVICES, INC.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address is:

5000 SW 52ND ST. SUITE 508

DAVIE, FLORIDA 33314

### **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:

1500 COMMON SHARES PAR VALUE \$0.01

### **ARTICLE V INITIAL OFFICERS / DIRECTORS**

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

PRESIDENT:

FRANCIS J. HERON

5000 SW 52ND ST. SUITE 508

DAVIE, FLORIDA 33314

11 OCT 10 AM 11:49  
CLERK OF DISTRICT COURT  
JALAHASSEE, FLORIDA

PAGE 2 HERON MEDICAL SERVICES, INC.

**ARTICLE VI REGISTERED AGENT**

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

FRANCIS J. HERON  
5000 SW 52ND ST. SUITE 508  
DAVIE, FLORIDA 33314

FILED  
11 OCT 10 AM 11:49  
TALLAHASSEE, FLORIDA

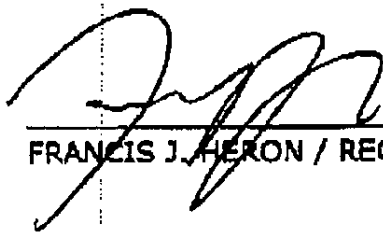
**ARTICLE VII INCORPORATOR**

The name and Florida street address of the incorporator is:

FRANCIS J. HERON  
5000 SW 52ND ST. SUITE 508  
DAVIE, FLORIDA 33314

\*\*\*\*\*

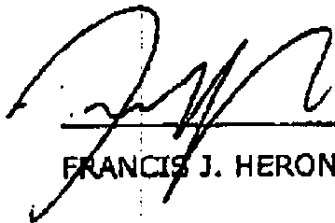
*Having been named as registered agent to accept service of process for the above corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*



FRANCIS J. HERON / REGISTERED AGENT

10-10-11

DATE



FRANCIS J. HERON / INCORPORATOR

10-10-11

DATE