

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.**

((H110002523523)))



H110002523523ABCV

**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 : FASTKIT CORP  
Account Number : I20100000009  
Phone : (305) 599-0839  
Fax Number : (305) 592-9591

RECEIVED OCT 19 2011

**\*\*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  
COMMUNITY HEALTH PROVIDERS, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

RECEIVED OCT 19 2011  
TALLAHASSEE, FLORIDA

11 OCT 19 PM 12:59

*Handwritten signature and date: 10/20/11*

Electronic Filing Menu

Corporate Filing Menu

Help

**ARTICLES OF INCORPORATION  
OF  
COMMUNITY HEALTH PROVIDERS, INC.**

In compliance with the requirements of F.S. Chapter 607, the undersigned hereby acts as an incorporator in adopting and filing the following articles of incorporation for the purpose of organizing a business corporation.

**ARTICLE I**

The name of the Corporation is: **COMMUNITY HEALTH PROVIDERS, INC.**

**ARTICLE II**

The street address of the principal office and mailing address of the Corporation is: 1321 NW 14<sup>th</sup> Street, Suite #404, Miami, Florida 33125.

**ARTICLE III**

The maximum number of shares this Corporation is authorized to issue is 10,000 (TEN THOUSAND), par value \$0.01 per share, all of which shall be Common Shares.

**ARTICLE IV**

The purpose for which the corporation is organized is for any lawful purpose:

**ARTICLE V**

The initial Officers and/or Directors are:

**PLINIO GONZALEZ**  
President, Secretary, Director  
1321 NW 14<sup>th</sup> Street, Suite #404  
Miami, Florida 33125

**ANTHONY M. DEGINA, JR.**  
Vice-President, Treasurer  
1321 NW 14<sup>th</sup> Street, Suite #404  
Miami, Florida 33125

RECEIVED  
11 OCT 19 PM 12:59  
TALLAHASSEE, FLORIDA

**ARTICLE VI**

The initial street address of the Corporation's registered office is: 1321 NW 14<sup>th</sup> Street, Suite #404, Miami, Florida 33125. The initial registered agent for the Corporation at that address is:

**PLINIO GONZALEZ**  
1321 NW 14<sup>th</sup> Street, Suite #404  
Miami, Florida 33125

**ARTICLE VII**

The name and street address of the person signing these articles of incorporation is:

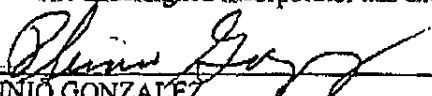
Name

Address

PLINIO GONZALEZ

1321 NW 14<sup>th</sup> Street, Suite #404  
Miami, Florida 33125

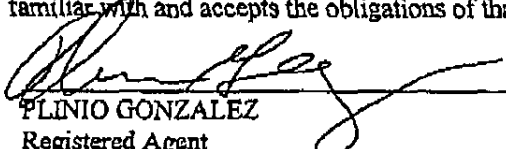
The undersigned incorporator has executed these articles of incorporation.

  
\_\_\_\_\_  
PLINIO GONZALEZ  
Incorporator

10-19-11  
Date

**ACCEPTANCE OF REGISTERED AGENT**

Having been named to accept service of process for COMMUNITY HEALTH PROVIDERS, INC. at the place designated in the articles of incorporation, the undersigned is familiar with and accepts the obligations of that position pursuant to F.S. 607.0501.

  
\_\_\_\_\_  
PLINIO GONZALEZ  
Registered Agent

10-19-11  
Date

11 OCT 19 PM 12:59  
TALLAHASSEE, FLORIDA