

P120000069203

Division of Corporations

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Florida Department of State

Division of Corporations

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To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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TALLAHASSEE, FLORIDA

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FLORIDA PROFIT/NON PROFIT CORPORATION
ARCHWAY MEIDICAL CENTER, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
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ARTICLES OF INCORPORATION
OF

12 AUG 10 AM 11:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARCHWAY MEDICAL CENTER, INC.

The undersigned hereby forms a Corporation under the following charter of Articles of incorporation:

ARTICLE I

The name of this Corporation shall be:

ARCHWAY MEDICAL CENTER, INC.

ARTICLE II

The principal place of business/mailling address is:

501 W. PERRY STREET
LANTANA, FL 33462

ARTICLE III

This Corporation is organized for the purpose of transacting any or all-lawful business.

ARTICLE IV

The aggregate number of shares which the corporation has authority to issue is one-thousand (1,000) shares of common stock having a par value of \$1.00 each. The Corporation elects to have preemptive rights for its shareholders.

ARTICLE V

This Corporation shall have one (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of this Corporation are:

JOHN OFFIDANI
3450 SO. OCEAN BLVD., SUITE LPH 1
HILAND BEACH, FL 33487

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ARTICLE VI


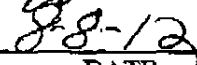
The name and address of the initial registered agent of this corporation is:

JOHN OFFIDANI
3450 SO. OCEAN BLVD., SUITE LPH 1
HILAND BEACH, FL 33487

ARTICLE VII

The name and address of the incorporator (s) of this corporation are:

JOHN OFFIDANI
3450 SO. OCEAN BLVD., SUITE LPH 1
HILAND BEACH, FL 33487


JOHN OFFIDANI/INCORPORATOR

DATE

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned Corporation, organized under the laws of the state of Florida, submits in the state of Florida.

1. The name of the Corporation is:

ARCHWAY MEDICAL CENTER, INC.

The name and address of the registered agent and office is:

JOHN OFFIDANI
3450 SO. OCEAN BLVD., SUITE LPH 1
HILAND BEACH, FL 33487

Having been named as registered agent and to accept service of process for the above stated Corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


JOHN OFFIDANI / REGISTERED AGENT

8-8-12
DATE

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