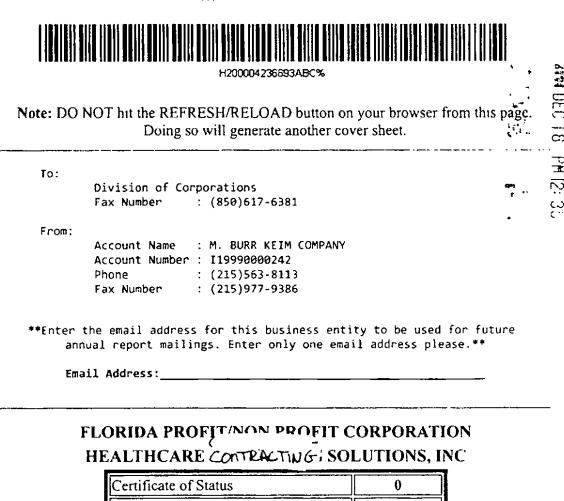
Electronic Filing Cover Sheet

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850-617 6381

December 14, 2020

FLORIDA DEPARTMENT OF STATE Division of Corporations

M. BURR KEIM COMPANY

SUBJECT: HEALTHCARE CONSULTING SOLUTIONS, INC

REF: W20000142064

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE Regulatory Specialist II

FAX Aud. #: H20000423669 Letter Number: 520A00025210 To:

12/18/2020 10:37 AM

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

CLE II PRI	NCIPAL OFFICE		
Cranes Point	Principal <u>street</u> address e Way		Mailing address, if different is
Palm Beach,	FL 33412		
CLEJII PUR	·	-	
	h the corporation is organized is:		
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Mame and T Address Name and T Address	of stock is: 1,000 FIAL OFFICERS AND/OR DIRECTORS itle: Lawrence Baron, Director 8041 Cranes Pointe Way West Palm Beach, FL 33412 tile: Lawrence Baron, Secretary 8041 Cranes Pointe Way West Palm Beach, FL 33412	Address: Name and Title Address.	West Palm Beach, FL 33412 Lawrence Baron, Treasurer 8041 Cranes Pointe Way West Palm Beach, FL 33412
Mame and T Address Name and T Address	of stock is: 1,000 FIAL OFFICERS AND/OR DIRECTORS itle: Lawrence Baron, Director 8041 Cranes Pointe Way West Palm Beach, FL 33412 tie: Lawrence Baron, Secretary 8041 Cranes Pointe Way	Address: Name and Title Address.	West Palm Beach, FL 33412 Lawrence Baron, Treasurer 8041 Cranes Pointe Way West Palm Beach, FL 33412
Mame and T Address Name and T Address	of stock is: 1,000 FIAL OFFICERS AND/OR DIRECTORS itle: Lawrence Baron, Director 8041 Cranes Pointe Way West Palm Beach, FL 33412 tile: Lawrence Baron, Secretary 8041 Cranes Pointe Way West Palm Beach, FL 33412	Address: Name and Title Address Name and Title	West Palm Beach, FL 33412 Lawrence Baron, Treasurer 8041 Cranes Pointe Way West Palm Beach, FL 33412

To:

. Fax: (850) 617-6381

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Name an	d Title	Name and Title			
Address		Address			
ADTICLE VI	REGISTERED AGENT				
	orida street address (PO Box NOT acceptable	e) of the registered agent is			
Name	Lawrence Baron	* * * * * * * * * * * * * * * * * * *			
Address	8041 Cranes Pointe Way				
	West Palm Beach, FL 33412				
ARTICLE VII	<u>INCORPORATOR</u>	~ ∑			
The name and ad	idress of the Incorporator is	* - မ			
Name.	Lawrence Baron	<u></u>			
Address:	8041 Cranes Pointe Way				
	West Palm Beach, FL 33412				
ARTICLE VIII	EFFECTIVE DATE:				
Effective date, if	other than the date of filing	(OPTIONAL) innot be more than five days prior or 90 days after the			
filing.)	are is noted, the date must be specific anteres	minor or more than the tay, prior or 70 days after the			
	inserted in this block does not meet the applic ffective date on the Department of State's reco	able statutory filing requirements, this date will not be listed as rds			
certificate, I am f	ned as registered agent to accept service of proce amiliar with and accept the appointment as reg	ess for the above stated corporation at the place designated in this istered agent and agree to act in this capacity			
10	m Bau	12 /16/2020			
	Required Signature/Registered Agent	Date			
I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.					
Lan	m Ban	12/16/2020			
Required Signatu		Date			