

145000020447

STATE OF FLORIDA
409 EAST GAINES STREET
TALLAHASSEE, FL 32399
FAX: (904) 922-4000

MIAMI FL 33144-0000
CONTACT: MIRIAM PEREZ
PHONE: (305) 267-7088
FAX: (305) 267-7944

(((H94000010680))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: RESPONSIVE PROVIDERS, INC.

FAX AUDIT NUMBER: H94000010680 CURRENT STATUS: REQUESTED
DATE REQUESTED: 11/07/1994 TIME REQUESTED: 13:52:51
CERTIFIED COPIES: 0 CERTIFICATE OF STATUS: 0
NUMBER OF PAGES: 5 METHOD OF DELIVERY: FAX
ESTIMATED CHARGE: \$70.00 ACCOUNT NUMBER: 072234002267

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TO: DIVISION OF CORPORATIONS
DEPARTMENT OF STATE
STATE OF FLORIDA

FROM: PEREZ & ASSOC.
1019 SW 67 AVE

409 EAST GAINES STREET
TALLAHASSEE, FL 32399

MIAMI FL 33144-0000

FAX: (904) 922-4000

CONTACT: MIRIAM PEREZ
PHONE: (305) 267-7888
FAX: (305) 267-7944

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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CERTIFICATE OF STATUS: \$0.00

ESTIMATED CHARGE: \$70.00

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YOU HAVE REQUESTED TO SUBMIT THE FOLLOWING DOCUMENT:

TYPE: EPIL01
CORPORATE NAME: TRAP-HOUSE SPORTING CLAYS, INC.

Handwritten notes: "PAP. and X" and "11/15/94" with a signature.



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 7, 1995

PEREZ & ASSOC.

MIAMI, FL

SUBJECT: REPOSITIVE PROVIDERS, INC.
REF: W95000004953

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

Section 15.16(3), Florida Statutes, requires each document to contain in the lower left-hand corner of the first page the name, address, and telephone number of the preparer of the original and, if prepared by an attorney licensed in this state, the preparer's Florida Bar membership number.

The FAX audit number must be on the top and bottom of each page of the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6975.

Jerri Weinmann
Document Examiner

FAX Aud. #: H94000010680
Letter Number: 295A00010065

Division of Corporations - P.O. Box 6327 - Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 8, 1995

PEREZ & ASSOC.

MIAMI, FL

SUBJECT: RESPONSIVE PROVIDERS, INC.
REF: W95000004953

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

Please accept our apology for failing to mention this in our previous letter.

Article VIII list an address for a Director, but there is no Director name listed, please correct.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6975.

Jerri Weimann
Document Examiner

FAK Aud. #: H94000010680
Letter Number: 395A00010343

Division of Corporations - P.O. Box 6327 - Tallahassee, Florida 32314

M. Perez

2644743

P. 04

95 MAR 14 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FA# H94000010680

ARTICLES OF INCORPORATION OF

RESPONSIVE PROVIDERS, INC.

The undersigned, being a natural person and competent to contract, for the purpose of establishing a corporation under the Florida Business-Corporation Act, Chapter 607, hereby adopt(s) the following Articles of Incorporation and does hereby certify that:

ARTICLE I - CORPORATE NAME AND ADDRESS

The name of this Corporation shall be: **RESPONSIVE PROVIDERS, INC.**

The Corporation's principal place of business and mailing address shall be:
1017 SW 67th Avenue, Miami, Florida 33144

ARTICLE II - NATURE OF BUSINESS

The general nature of business to be transacted by this Corporation is any activity or business permitted under the laws of the United States and under the laws of the State of Florida.

ARTICLE III - CAPITAL STOCK

This Corporation is authorized to issue a maximum of 500 shares of common stock, at \$1.00 per value. All such shares are one of class and are designated as Common Stock.

Shares of common stock may be issued in exchange for cash, real property, labor, or service rendered, or any combination of the foregoing. In the absence of fraud in the transaction, the judgement of the Board of Directors as to the value of any such consideration shall be conclusive.

Each share of common stock shall entitle the record holder thereof to one vote upon each proposal presented at meetings of the stockholders of the Corporation. No holder of common stock shall be entitled to any right of cumulative voting.

Miriam Perez
Tax Consultant
1019 S.W. 67 Avenue
Miami, Florida 33144
(305) 267-7888

FA# H94000010680

Fax Audit # H94000010680

M. Perez

2644743

P. 03

ARTICLE IV - MINIMUM CAPITAL

The minimum amount of capital with which the Corporation shall commence business is Five Hundred Dollars (\$500.00)

ARTICLE V - POWERS AND DURATION OF CORPORATION

The Corporation shall have all the powers conferred upon corporations organized pursuant to the provisions of Chapter 607, Florida Statutes, and shall have perpetual existence unless dissolved according to law.

ARTICLE VI - INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent and registered office in the State of Florida shall be:

Alfred Perez
1017 SW 67th Avenue
Miami, Florida 33144

ARTICLE VII - BOARD OF DIRECTORS

This Corporation shall have one director initially. The number of directors may be altered from time to time by By-Laws adopted by the shareholders.

ARTICLE VIII - INITIAL DIRECTORS

The name and post office address of the Initial Director of this Corporation is:

Alfred Perez
6528 Flagler Street
Hollywood, Florida 33023

Fax Audit # H94000010680

FA# H94000010680

The members of this first Board of Directors shall hold office for the first year of existence of this Corporation, or until their successors are elected or appointed and have qualified, whichever occurs first.

ARTICLE IX - INCORPORATORS

The name and post office address of the incorporator executing these Articles of Incorporation is as follows:

Alfred Perez
6528 Flagler Street
Hollywood, Florida 33023

The undersigned incorporator, for the purpose of forming a Corporation to do business within the State of Florida does make and file these Articles of Incorporation, hereby declaring and certifying that the facts herein stated are true.



FA# H94000010680

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ACKNOWLEDGEMENT OF REGISTERED AGENT

Having been named as Registered Agent and to accept service of process for the above stated Corporation at the place designated in these Articles of Incorporation, 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.

Signature Alfred D. Perez
Date 7/28/94

STATE OF FLORIDA)
) SS.
COUNTY OF DADE)

BEFORE ME, a Notary Public duly authorized to make acknowledgments personally appeared ALFRED D. PEREZ to me known to be the person described as Incorporator(s) in the foregoing Articles of Incorporation and who acknowledged before me that he / she executed said Articles of Incorporation for the purposes therein expressed.

WITNESS my hand and seal this 28th day of July of 1994.

My commission expires:
01 May 1998

[Signature]
Arnaldo Alfonso, Sr.
Notary Public
State of Florida at large



ARNALDO ALFONSO, SR.
COMMISSION # CC 358238
EXPIRES MAY 1, 1998
BONDED THROUGH
ATLANTIC BONDING CO., INC.

FILED
95 MAR 14 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P95000020447

Al Perry
1017 SW 67 Ave.
MIAMI - FL. 33144

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OFFICE USE ONLY

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TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

- _____
(Corporation Name) (Document #)
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(Corporation Name) (Document #)
- _____
(Corporation Name) (Document #)
- _____
(Corporation Name) (Document #)

- Walk in Pick up time _____ Certified Copy
- Mail out Will wait Photocopy Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input checked="" type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

N. HENDRICKS SEP - 8 1995

Examiner's Initials



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95 SEP -5 AM 10:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Florida Department of State, Jim Smith, Secretary of State

AFFIDAVIT OF RESIGNATION OF OFFICER AND/OR DIRECTOR

STATE OF Florida
COUNTY OF DADE

I, ALFRED PEREZ after being duly sworn, state that to the best of my knowledge, information and belief, and under the penalties of perjury, the following is true and correct:

I, ALFRED PEREZ, hereby resign as PRES/DIR of RESPONSIVE PROVIDERS, INC., a Florida corporation;
(Name of Corporation)

That the corporation has been notified in writing of the resignation.

Alfred Perez
Signature of resigning officer/director

Sworn to and subscribed before me this 15th day of August 1995.



ARNALDO ALFONSO, SR.
COMMISSION # CC 358223
EXPIRES MAY 1, 1998
BONDED THRU
ATLANTIC BONDING CO., INC.

Arnaldo Alfonso Sr.
NOTARY PUBLIC

My Commission Expires: _____

FILING FEE IS \$35.00