

P95000029287

OFFICE USE ONLY (Document #)

Paul Menden
(Requestor's Name)

(Address)

(City, State, Zip) (Phone #)

OFFICE USE ONLY

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

1. Cornerstone HealthCare Group, Inc.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(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 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

FILED
95 APR 13 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Be 4/13

Examiner's Initials

**ARTICLES OF INCORPORATION
FOR
CORNERSTONE HEALTHCARE GROUP, INC.**

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TALLAHASSEE, FLORIDA

ARTICLE I. NAME

The name of the corporation is: **CORNERSTONE HEALTHCARE GROUP, INC.**

The corporation's business shall be conducted in the United States, in its possessions and in all foreign countries, wherever necessary or convenient.

ARTICLE II. DURATION OF CORPORATION

The duration of existence of this corporation is and shall be perpetual or until dissolved according to law.

ARTICLE III. PURPOSE

The general purpose of the business or businesses to be transacted, conducted and carried on by this corporation shall be to engage in any activity or business permitted under the laws of Florida.

ARTICLE IV. CORPORATE POWERS

The corporation shall have all powers granted to corporations under Chapter 607, Florida Statutes, (as from time to time amended) and other provisions of the Florida Statutes presently or hereafter enacted.

ARTICLE V. CAPITAL STOCK

The authorized aggregate capital shares of this corporation shall be 100 shares of common stock, each share having a par value of \$1.00.

ARTICLE VI. INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation in the State of Florida is:

**Amundsen & Moore, Law Offices
502 East Park Avenue
Tallahassee, Florida 32301**

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

**Paul H. Amundsen
Attorney at Law**

ARTICLE VII. INITIAL OFFICERS AND BOARD OF DIRECTORS

This corporation shall have one (2) directors initially. The number of directors may be either increased or diminished from time to time by the Bylaws but shall never be less than one

(1). The name and residence address of the initial officers and directors of this corporation are:

<u>Name</u>	<u>Street Address</u>
Lucinda Hietbrink President/Director	3843 Spyglass Hill Road Sarasota, FL 34238
Roger Hietbrink Vice Pres./Director	3843 Spyglass Hill Road Sarasota, FL 34238

ARTICLE VIII. INCORPORATOR

The name and address of the person signing these Articles as incorporator is:

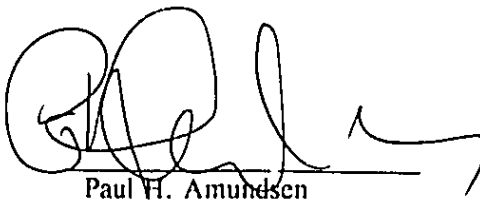
Name

Street Address

Paul H. Amundsen

502 East Park Avenue
Tallahassee, FL 32301

IN WITNESS WHEREOF, the undersigned incorporator has hereunto set his hand and seal on this 13th of April 1995.



Paul H. Amundsen

STATE OF FLORIDA
COUNTY OF LEON

Before me, a notary public authorized to take acknowledgments in the state and county set forth above, personally appeared Paul H. Amundsen, known to me and known by me to be the person who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed by official seal, in the state and county aforesaid, this 13th day of April, 1995.

Patricia R. Herring
Notary Public
State of Florida at Large

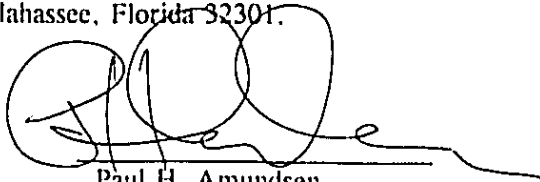
My Commission Expires:



**CERTIFICATE DESIGNATING REGISTERED OFFICE
AND REGISTERED AGENT
FOR SERVICE OF PROCESS WITHIN FLORIDA**

In compliance with Florida Statutes Sections 48.091 and 607.034, the following is submitted:

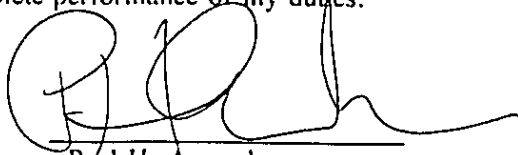
Cornerstone Healthcare Group, Inc., desiring to organize or qualify under the laws of the State of Florida, hereby designates Paul H. Amundsen its registered agent to accept service of process within the State of Florida and the address of its registered office shall be 502 East Park Avenue Tallahassee, Florida 32301.



Paul H. Amundsen
Incorporator

Dated: April 13th, 1995

Having been named to accept service of process for the above stated corporation, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.



Paul H. Amundsen

Dated: April 13, 1995

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TALLAHASSEE, FLORIDA