

P95000041248

TO: DIVISION OF CORPORATIONS
DEPARTMENT OF STATE
STATE OF FLORIDA
409 EAST GAINER STREET
TALLAHASSEE, FL 32399
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FROM: EMPIRE CORPORATE KIT COMPANY
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(((H95000005784)))
DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: AMERICAN HEALTH PLAN AFFILIATED PROVIDERS, INC.
FAX AUDIT NUMBER: H95000005784
DATE REQUESTED: 06/23/1995
CERTIFIED COPIES: 1
NUMBER OF PAGES: 4
ESTIMATED CHARGE: \$122.50
CURRENT STATUS: REQUESTED
TIME REQUESTED: 13:58:02
CERTIFICATE OF STATUS: 0
METHOD OF DELIVERY: FAX
ACCOUNT NUMBER: 072450003255

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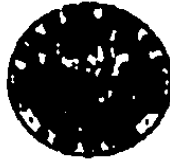
FILED
95 MAY 25 PM 4:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten signature and date: 5/25/95

Handwritten: 5670, 219

Handwritten: 47874, 10874

95 MAY 23 PM 3:55



FLORIDA DEPARTMENT OF STATE
Hankla B. Mortham
Secretary of State

May 24, 1995

EMPIRE

MIAMI, FL

SUBJECT: AMERICAN HEALTH PLAN AFFILIATED PROVIDERS, INC.
REF: W95000010874

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

The registered agent and registered office listed in your articles of incorporation must be consistent throughout 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) 487-6931.

Steven Godfrey
Corporate Specialist

FAK Aud. #: W95000005764
Letter Number: 795A00026369

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

ARTICLES OF INCORPORATION

OF

AMERICAN HEALTH PLAN AFFILIATED PROVIDERS, INC.

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, do hereby adopt the following articles of incorporation:

ARTICLE ONE
NAME

The name of the corporation is AMERICAN HEALTH PLAN AFFILIATED PROVIDERS, INC.

ARTICLE TWO
CORPORATE DURATION

The duration of the corporation is to be perpetual.

ARTICLE THREE
PURPOSE

The corporation may engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE FOUR
CAPITALIZATION

The aggregate number of shares which the corporation is authorized to issue is 10,000 shares. Such shares shall be of a single class, and shall have a par value of One Dollar (\$1.00) per share.

ARTICLE FIVE
PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be 600 West 20th Street, Hialeah, Florida 33010.

ARTICLE SIX
REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the corporation is 2701 S.W. LeJeune Road, Suite 401, Coral Gables, Florida 33134, and the name of its initial registered agent at such address, is Jose R. Pujols.

JOSE R. PUJOLS, ESQ.
2701 S. BAYSHORE DR., #401
CORAL GABLES, FL 33134
(305) 569-9533
FL BAR NO. 936911

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55 MAY 20 PM 4:51
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TALLAHASSEE, FLORIDA

LaJeune Road, Suite 401, Coral Gables, Florida 33134

**ARTICLE SEVEN
DIRECTORS**

The number of directors constituting the initial board of directors of the corporation shall be not less than One (1). The name and address of each person who is to serve as a member of the initial board of directors is:

Name	Address
Wilfred Braceras	600 West 20th Street Hialeah, Florida 33010

**ARTICLE EIGHT
INCORPORATORS**

The name and address of each incorporator is:

Name	Address
Jose R. Pujols	2701 S.W. LaJeune Road, Suite 401 Coral Gables, Florida 33134

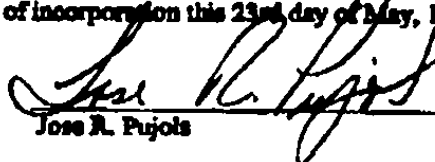
**ARTICLE NINE
INDEMNIFICATION**

This corporation shall indemnify and may insure its officers and directors to the fullest extent permitted by law.

**ARTICLE TEN
AMENDMENTS**

These articles of incorporation may be amended in the manner authorized by at the time of amendment.

IN WITNESS WHEREOF, I, Jose R. Pujols, being the incorporator of this corporation, make and file these articles of incorporation this 23rd day of May, 1995.


Jose R. Pujols

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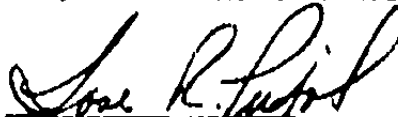
**CERTIFICATE DESIGNATING PLACE OF BUSINESS FOR DOMICILE FOR
THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT
UPON WHOM PROCESS MAY BE SERVED**

IN COMPLIANCE WITH SECTION 607.0501, FLORIDA STATUTES, THE FOLLOWING
IS SUBMITTED:


THAT AMERICAN HEALTH PLAN AFFILIATED PROVIDERS, INC., DESIRING TO
ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS
PRINCIPAL PLACE OF BUSINESS AT,

400 WEST 20TH STREET
HIALEAH, FLORIDA 33010

HAS NAMED JOSE R. FUJOLS, ESQ., LOCATED AT 2701 S.W. LEBUENE ROAD, SUITE
401, CORAL GABLES, FLORIDA 33134, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS
WITHIN FLORIDA.


Jose R. Pujols, Incorporator

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED
CORPORATION, AT THE PLACE DESIGNATED IN THE CERTIFICATE, I HEREBY AGREE
TO ACT IN THIS CAPACITY, AND FURTHER AGREE TO COMPLY WITH THE
PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE
PERFORMANCE OF MY DUTIES.

By 
Jose R. Pujols

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TALLAHASSEE, FLORIDA