

P95000057362

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904) 224-8870
Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
TOLL FREE No. 1-800-342-8062
FAX (904) 222-1222

NAME _____
FIRM _____
ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
One Day Service Two Day Service

To us in _____ Return via _____

Mailor No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUL 25 PM 1:56

AL 7/25/95

REQUEST TAKEN CONFIRMED APPROVED
DATE _____
TIME _____ CK No. _____
BY ALC _____

WALK-IN 7/25 12:30
Will Pick Up

RE: Tangent Healthcare Corp.
95 JUL 25
DIVISION OF CORPORATIONS
C.O. FEE.58 DISBURSED

☒ Capital Express™
☒ Art. of Inc. File _____

Corp. Record Search _____

Ltd. Partnership File _____

☒ Foreign Corp. File _____

☒ () Cert. Copy(s) _____

Art. of Amend. File _____

Dissolution/Withdrawal _____

C U S. _____

Fictitious Name File _____

Name Reservation _____

Annual Report/Restatement _____

Reg. Agent Service _____

Document Filing 100001545221
-07/25/95-01056-008
***122.50 ***122.50

Corporate Kit _____

Vehicle Search _____

Driving Record _____

Document Retrieval _____

UCC 1 or 3 File _____

UCC 11 Search _____

UCC 11 Retrieval _____

File No.'s, _____ Copies _____

Courier Service _____

Shipping/Handling _____

Phone () _____

Top Priority _____

Express Mail Prep. _____

FAX () _____ pgs. _____

SUBTOTALS _____
FEE..... \$ _____
DISBURSED..... \$ _____
SURCHARGE..... \$ _____
TAX on corporate supplies..... \$ _____
SUBTOTAL..... \$ _____
PREPAID..... \$ _____
BALANCE DUE..... \$ _____
..... \$ _____

Please remit invoice number with payment
TERMS: NET 10 DAYS FROM INVOICE DATE
1 1/2% per month on Past Due Amounts
Rest 20 Days

THANK YOU
from

ARTICLES OF INCORPORATION
OF

TANGENT HEALTHCARE CORP.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUL 25 PM 1:56

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is **TANGENT HEALTHCARE CORP.**

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 9530 N.W. 16th St., Plantation, FL 33322.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having a par value of one dollar (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Raymond A. Reiser, Esq., Reiser & Allison, P.A., Sunbank International Center, One S.E. Third Avenue, Suite 1240, Miami, FL 33131.

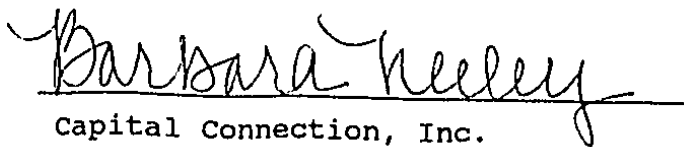
ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of the member of the initial Board of Directors of the corporation is Forrest L. Bledsoe, 9530 N.W. 16th Street, Plantation, FL 33322,

The undersigned has executed these Articles of Incorporation this 25th day of July, 1995.



Capital Connection, Inc.

Barbara Neeley - President
Incorporator

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONSCERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE 95 JUL 25 PM 1:56

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: TANGENT HEALTHCARE
CORP

2. The name and street address of the registered agent and office is: RAYMOND A. REISER, ESQ., REISER & ALLISON, P.A.,
SUNBANK INTERNATIONAL CENTER, ONE S.E. THIRD AVENUE,
SUITE 1240, MIAMI, FL 33131

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.

RLA