

P96000001355



OFFICE USE ONLY

100001673981  
 -12/29/95--01030--018  
 \*\*\*\*\*70.00 \*\*\*\*\*70.00

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

1. \_\_\_\_\_  
(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 DEC 29 PM 12:00  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

SN JAN 0 5 1996

Examiner's Initials

FILED  
95 DEC 29 PM 12:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION  
OF  
MONTILLA REMODELING, INC.

THE UNDERSIGNED, A NATURAL PERSON COMPETENT TO CONTRACT, DOES  
HEREBY MAKE, SUBSCRIBE AND FILE THESE ARTICLES OF INCORPORATION  
FOR THE PURPOSE OF ORGANIZING A CORPORATION UNDER THE LAWS OF THE  
STATE OF FLORIDA.

ARTICLE 1

THE NAME OF THIS CORPORATION SHALL BE: *of Montilla Remodeling* FAITH INCORPORATED  
AND THE ADDRESS SHALL BE: 159 LAKEVIEW DR. BLDG. 306 #101  
FT. LAUDERDALE, FL. 33326

ARTICLE 2

NATURE OF CORPORATE BUSINESS AND POWERS

THE GENERAL NATURE OF THE BUSINESS TO BE TRANSACTED BY THIS

CORPORATION SHALL BE TO ENGAGE IN ANY AND ALL LAWFUL BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA.

ARTICLE 3

CAPITAL STOCK

THE MAXIMUM NUMBER OF SHARES THAT THIS CORPORATION SHALL BE AUTHORIZED TO ISSUE AND HAVE OUTSTANDING AT ONE TIME SHALL BE 100,000 SHARES OF COMMON STOCK, \$1.00 VALUE PER SHARE.

ARTICLE 4

THIS CORPORATION SHALL HAVE PERPETUAL EXISTENCE.

ARTICLE 5  
REGISTERED AGENT AND  
INITIAL REGISTERED OFFICE IN FL.

THE REGISTERED AGENT AND THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE OF THIS CORPORATION IN THE STATE OF FLORIDA SHALL BE:

MR. ORLANDO C. PIEDRA  
5394 SW 119TH AVE.  
FT. LAUDERDALE, FL. 33330

ARTICLE 6

THIS CORPORATION SHALL HAVE ONE DIRECTOR INITIALLY.

ARTICLE 7

THE NAME AND ADDRESS OF THE INITIAL DIRECTOR OF THIS CORPORATION IS:

MR. RAMON MONTILLA  
159 LAKEVIEW DR. BLDG. 306  
APT #101  
FT. LAUDERDALE, FL. 33326

THE PERSONS NAMED AS INITIAL DIRECTOR SHALL HOLD OFFICE FOR THE FIRST YEAR OF EXISTENCE OF THIS CORPORATION, OR UNTIL HIS SUCCESSOR IS ELECTED OR APPOINTED AND HAS QUALIFIED, WHICHEVER OCCURS FIRST.

ARTICLE 8

INCORPORATOR

THE NAME OF THE PERSON SIGNING THESE ARTICLES OF INCORPORATION AS THE INCORPORATOR IS ORLANDO C. PIEDRA, AND HIS ADDRESS IS 5394 SW 119TH AVE.. FT. LAUDERDALE, FL. 33330

ARTICLE 9  
INDEMNIFICATION

THIS CORPORATION SHALL INDEMNIFY TO THE FULLEST EXTENT PERMITTED BY FLORIDA STATUTE 607.014, AS MAY BE AMENDED FROM TIME TO TIME ANY DIRECTOR OR OFFICER OF THE CORPORATION WHO IS A PARTY OR IS THREATENED, PENDING OR COMPLETED ACTION OR SUIT BROUGHT AGAINST SA1. OFFICER OR DIRECTOR IN THEIR OFFICIAL CAPACITY. THIS

CORPORATION SHALL NOT INDEMNIFY ANY DIRECTOR OR OFFICER IN ANY ACTION OR SUIT, THREATENED, PENDING OR COMPLETED, BROUGHT BY HIM AGAINST THE CORPORATION. IN THE EVENT THE OFFICER OR DIRECTOR IS NOT THE PREVAILING PARTY, INDEMNIFICATION OF ANY OTHER PERSONS SUCH AS EMPLOYEES OR AGENTS OF THE CORPORATION, OR SERVING AT THE REQUEST OF THE CORPORATION AS A DIRECTOR, OFFICER, EMPLOYEE OR AGENT OF ANOTHER CORPORATION, PARTNERSHIP, JOINT VENTURE, TRUST, OR OTHER ENTERPRISE, SHALL BE DETERMINED IN THE SOLE AND ABSOLUTE DISCRETION OF THE BOARD OF DIRECTORS OF THE CORPORATION. PURSUANT TO FLORIDA STATUTE 607.014(9), NO COURT ORDER INDEMNIFICATION SHALL, UNDER ANY CIRCUMSTANCES, BE PERMITTED.

ARTICLE 10

THIS CORPORATION EXPRESSLY ELECTS NOT TO BE GOVERNED BY FLORIDA

STATUTE 607.018, AS AMENDED FROM TIME TO TIME, RELATING TO  
AFFILIATED TRANSACTIONS.

ARTICLE 11  
CONTROL SHARE ACQUISITIONS

THIS CORPORATION EXPRESSLY ELECTS NOT TO BE GOVERNED BY FLORIDA  
STATUTE 607.109, AS AMENDED FROM TIME TO TIME, RELATING TO  
CONTROL SHARE ACQUISITIONS.

IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATOR HAS EXECUTED  
FOREGOING ARTICLES OF INCORPORATION OF OCTOBER 30TH 1995



ORLANDO C. PIEDRA, INCORPORATOR

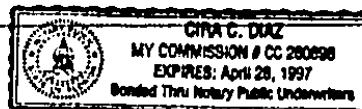
STATE OF FLORIDA    )  
                          )  
                          ) SS  
COUNTY OF BROWARD )

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME ON THIS 30TH  
DAY OF OCTOBER, 1995 BY ORLANDO C. PIEDRA AS INCORPORATOR.



NOTARY PUBLIC  
STATE OF FLORIDA

MY COMMISSION EXPIRES: \_\_\_\_\_



I. ORLANDO C. PIEDRA, AM FAMILIAR WITH AND ACCEPT THE DUTIES  
AND RESPONSIBILITIES AS REGISTERED AGENT FOR SAID CORPORATION.

OC

FILED

95 DEC 29 PM 12:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ID:

MAR 26 '96 11:54 No.009 P.02

F96000001355

AKERMAN, SEYMOUR, MITCHELL & WILSON, P.A.  
ATTORNEYS AT LAW

100 SOUTH WALKER DRIVE, SUITE 1800  
POST OFFICE BOX 3273  
TAMPA, FLORIDA 33601-3273  
(813) 282-7333  
TELECOPY (813) 282-8077

March 26, 1996

800001741928  
03/13/96 01092 017  
\$70.00

By Telecopier: 801-407-6011

Ms. Fretta Lott  
Secretary of State  
State of Florida

Re: Starmed Health Personnel, Inc.

Dear Ms. Lott:

Per your request, attached please find copies of what I received from your office pertaining to Starmed Health Personnel, Inc.

Very truly yours,  
*[Signature]*  
Mildred S. Davis

/asd

Enclosures

Original document  
misplaced by Doc. Prep  
FL

ORLANDO

MIAMI

TALLAHASSEE

TAMPA





**FLORIDA DEPARTMENT OF STATE**  
**Sandra B. Mortham**  
Secretary of State

March 18, 1996

**CSC NETWORKS**

Qualification documents for STARMED HEALTH PERSONNEL INC. were filed on March 18, 1996, and assigned document number F9600001355. Please refer to this number whenever corresponding with this office.

Your corporation is now qualified and authorized to transact business in Florida as of the file date.

A corporation annual report will be due this office between January 1 and May 1 of the year following the calendar year of the file date. A Federal Employer Identification (FEI) number will be required before this report can be filed. If you do not already have an FEI number, please apply NOW with the Internal Revenue by calling 1-800-829-3676 and requesting form SS-4.

Please be aware if the corporate address changes, it is the responsibility of the corporation to notify this office.

Should you have any questions regarding this matter, please telephone (904) 487-6091, the Foreign Qualification/Tax Lien Section.

Freta Lott  
Corporate Specialist Supervisor  
Division of Corporations

Letter Number: 396A00012107

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

### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. STARNCO ~~HEALTH~~ HEALTH PERSONNEL INC.  
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Delaware  
(State or country under the law of which it is incorporated)
3. 59-3297579  
(FEI number, if applicable)
4. February 21 1995  
(Date of incorporation)
5. PERPETUAL  
(Duration: Year corp. will cease to exist or "perpetual")
6. MARCH 1 1995  
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 617.155, F.S.))
7. 2701 N. ROCKY POINT DRIVE  
Suite 650 TAMPA FLORIDA 33607  
(Current mailing address)
8. Supplemental STAFFING OF MEDICAL PERSONNEL  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent:  
Name: Prentice-Hall Corporation SYSTEM, INC.  
Office Address: 1201 HAYZ STREET  
TALLAHASSEE, Florida 32301, Florida, 32301  
(Zip Code)

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96 MAR 18 AM 10:5  
TALLAHASSEE  
FLORIDA

10. Registered agent's acceptance:  
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Marcia A. Havner 3-13-96  
(Registered agent's signature)  
Marcia A. Havner, Assistant Secretary

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: ROBERT J. ADAMSON  
Address: 1662 CROSS TEE COURT  
OLDSMAR FLORIDA 34677

~~Chairman:~~ \_\_\_\_\_  
Address: \_\_\_\_\_

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: ROBERT ADAMSON  
Address: 1662 CROSS TEE COURT  
OLDSMAR, Florida 34677

Vice President: \_\_\_\_\_  
Address: \_\_\_\_\_

Secretary: STEPHEN M. DAVIS  
Address: 711 F.ETH AVENUE  
NEW YORK, NEW YORK 10022-3194

Treasurer: BURTON ADAMSON  
Address: 1662 CROSS TEE COURT OLDSMAR Florida 34677

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. \_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

36 MAR 8 AM 10:55  
REC'D  
ELIMASSE  
FLORIDA

State of Delaware  
Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "STARMED HEALTH PERSONNEL, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF MARCH, A.D. 1996.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

FILED  
96 MAR 18 AM 10:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



*Edward J. Freel*

Edward J. Freel, Secretary of State

2482581 8300

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AUTHENTICATION:

7859609

DATE:

03-11-96