

P96000004814
TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: COMPREHENSIVE PHP, INC
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check
for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: ALFREDO TURNES
Name (printed or typed)

717 Ponce De Leon

Address

CORAL Gables Fl 33134

City, State & Zip

305-444-7144

Daytime Telephone number

FILED
96 JAN 11 AM 8:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

980001686679
-01/11/96--01043--004
****122.50 ****122.50

JAN 17 1996 BSB

NOTE: Please provide the original and one copy of the articles.

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96 JAN 11 AM 8:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

COMPREHENSIVE PHP, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

717 Ponce De Leon Coral Gables, Fl 33134

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 Shares of \$1.00 each

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ALFREDO TURNES (PRESIDENT)

1741 SW 138 CT Miami, Fl. 33135

ARTICLE V INCORPORATOR(S)

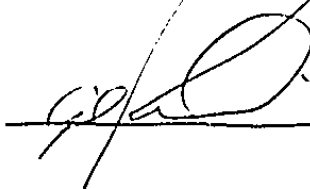
See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

ALFREDO TURNES (PRESIDENT)
1741 SW 138 CT Miami, FL 33135

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

29th day of NOVEMBER, 19 95



Signature

Signature

Signature

NOTE: Adding an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED 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: COMPREHENSIVE PHD, INC
717 Ponce de Leon CORAL GABLES FL 33134
2. The name and address of the registered agent and office is:

ALFREDO TURNES
(NAME)

1741 SW 138 CT
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

MIAMI, FL. 33135

(CITY/STATE/ZIP)

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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.


(SIGNATURE)

11-28-95
(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314