

826337 REPERENCE a 4381948

#### AUTHORIZATION .

## COST LUMBER II - \$ ORDER DATE # January 31, 1996 9000001709479 -02/07/96--01054--017 \*\*\*\*122.50 \*\*\*\*122.50 ORDER TIME : ORDER NO. 826337 CUSTOMER NO a 4381948 CUSTOMER& James P. Poskosky, Esq. COHEN DERKE BERNSTEIN BRODIE KONDELL & LASZLO, P.A. 19th Floor 8601 South Bayshore Drive Mama, FL 33133 DOMESTIC FILING

NOME:

BEACON HEALTH PLANS, INC.

X ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: JAN 31 AN II: 2 X CERTIFIED COPY \_\_\_\_\_FLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: GLS

EXAMINER'S INITIALS:



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

31st dules

CSC NETWORKS 1201 HAYS STREET TALLAHASSEE, FL 32301

SUBJECT: BEACON HEALTH PLANS, INC. Ref. Number: W96000002474

We have received your document for BEACON HEALTH PLANS, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The signature on the Affldavit must be notarized.

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) 487-6932.

Teresa Brown Corporate Specialist

Letter Number: 896A00004472

# **AFFIDAYIT**

The undersigned, being the Presid and all of the Directors of Beacon Health Plans, Inc., a Plorida corporation, have voluntarily dissolved Beacon Health Plans, Inc. on January 31, 1996 and have no intention of revoking the dissolution. The undersigned hereby authorizes the release of the name Beacon Health Plans, Inc.

the release of the futfle M	acon realli	thus, inc.
		BEACON HEALTH PLANS, INC.
		By: Seis What
		Luis Moll, President and Director
		By: Sonia Torres, Director
STATE OF FLORIDA	)	Sonia Torres, Director
COUNTY OF DADE	) SS: )	•
1996, by Luis Moll, as	President and	was acknowledged before me this 31st day of January, Director of Beacon Health Plans, Inc., a Florida, who is personally known to me or who has produced eation.
		Sign: NOTARY PUBLIC:
		Print: MAKIH E. MUKIOZ- State of Florida
		My Commission Expires:
STATE OF FLORIDA	) ) SS:	MOTARY PUBLIC, STATE OF FLORIDA
COUNTY OF DADE	)	MY COMMISSION NO: CC-368504 MY COMMISSION EMPRES MAY 28, 1968
1996, by Sonia Torres, as	Director of I	was acknowledged before me this 31st day of January, Beacon Health Plans, Inc., a Florida corporation, on personally known to me or who has produced
		NOTARY PUBLIC:
		Print: AMLIA E. MUNOZ
		State of Florida

# ARTICLES OF INCORPORATION OF BEACON HEALTH PLANS, INC.

TARRAMAN STATE OF STA

The undersigned, acting as incorporator of Beacon Health Plans, Inc. (the "Corporation") under the Florida Business Corporation Act, adopts the following Articles of Incorporation.

#### ARTICLE I

## NAME

The name of the Corporation is: Beacon Health Plans, Inc..

#### ARTICLE II

# COMMENCEMENT OF EXISTENCE

The existence of the Corporation will commence on the date of filing of these Articles of Incorporation with the Secretary of State of the State of Florida.

# ARTICLE III

## **DURATION**

The duration of the Corporation will be perpetual.

#### ARTICLE IV

#### **PURPOSE**

The primary purpose for which the Corporation is organized is to transact any and all lawful business in connection with providing health care or other services permitted under Chapter 641 of the Florida Statutes.

# ARTICLE V

## **PRINCIPAL OFFICE**

The principal office of the Corporation shall be:

Beacon Health Plans, Inc. 760 N.W. 107th Avenue Miami, Florida 33172

#### ARTICLE VI

# **AUTHORIZED SHARES**

The maximum number of shares that the Corporation is authorized to issue is Ten Thousand (10,000) shares of Common Stock at \$.01 par value per share.

#### ARTICLE VII

# INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Corporation is 2601 South Bayshore Drive, 19th Floor, Miami, Florida 33133, and the name of the Corporation's initial registered agent at that address is COBER Corporate Agents, Inc.

# ARTICLE YIII - INITIAL BOARD OF DIRECTORS

The Corporation shall have one director initially. The number of directors may be increased or decreased from time to time, as provided in the Bylaws. The name and address of the initial director is:

**Name** 

**Address** 

Raymond E. Noonan

760 N.W. 107th Avenue, Suite 206 Miami, Florida 33172

### **ARTICLE IX**

# **INCORPORATOR**

The name and street address of the incorporator is:

Name Address

Raymond E. Noonan 760 N.W. 107th Avenue, Suite 206

Miami, Florida 33172

#### ARTICLE X

#### INDEMNIFICATION

To the extent permitted by law, the Corporation shall indemnify any person who was or is a party to any proceeding by reason of the fact that he is or was a director, officer, employee, or agent of the Corporation or is or was serving at the request of the Corporation as a director, officer, employee, or agent of another corporation, partnership, joint venture, trust or other enterprise against liability incurred in connection with such proceeding, including any appeal thereof, if he acted in good faith and in a manner he reasonably believed to be in, or not opposed to, the best interests of the Corporation and, with respect to any criminal action or proceeding, had no reasonable cause to believe his conduct was unlawful. The Corporation shall relimburse each person for all costs and expenses, including attorneys' fees, reasonably incurred by him in connection with any such liability in the manner provided for by law or in accordance with the Corporation's Bylaws.

The rights accruing to any person under the foregoing provision shall not exclude any other right to which he may be lawfully entitled, nor shall anything therein contain or restrict the right of the Corporation to indemnify or reimburse such person in any proper case even though not specifically provided for herein.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation as of the 31st day of January, 1996.

Raymond E. Noonan, Incorporator

# ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been designated as registered agent for Bencon Health Plans, Inc. in the foregoing Articles of Incorporation, I, on behalf of COBER Corporate Agents, Inc., a Florida corporation, hereby agree to accept service of process for said corporation and to comply with all statutes relative to the complete and proper performance of the duties of a registered agent. I am familiar with and accept the obligations of that position.

COBER CORPORATE AGENTS, INC.

Karen P. Kondell, Treasurer

c08617.jpm

96 JAN 31 MI II: 22
SECRETARY OF STATE
SECRETARY OF STATE