

P96000044408

5/25/96

Please find enclosed the  
Articles of Incorporation for  
Healthcare Resource Management, Inc.  
and a check for \$122.50 to the  
"Department of State Division of  
Corporations".

RECEIVED  
MAY 25 1996  
CORPORATION DIVISION  
STATE DEPARTMENT

100001612261  
-05/09/96--01003--003  
\*\*\*\*122.50 \*\*\*\*122.50

Thank You.

~~DMF~~

Dianne M. Finn

P.O. Box 24231

Tampa, Fl. 33623-4231

789,615, 706,611  
w/96—10160

Dear Donis -

5/20/96

Please find enclosed a copy of  
the letter you sent, The Articles of  
Incorporation ~~the~~ + the Certificate of  
Designation of Registered Agent.

Phone #'s where I may be reached:

business 813-879-1700

home 813-949-2942

Pager 813-333-0844

Thank you -

Denise M. Furin



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

May 13, 1998

**DIANNE M. FINN**  
**POST OFFICE BOX 24231**  
**TAMPA, FL 33623-4231**

**SUBJECT: HEALTHCARE RESOURCE MANAGEMENT, INC.**  
**Ref. Number: W98000010160**

We have received your document for HEALTHCARE RESOURCE MANAGEMENT, 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 document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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) 487-6972.

**Doris Brown**  
**Document Specialist**

**Letter Number: 896A00023715**

ARTICLES OF INCORPORATION  
OF  
HEALTHCARE RESOURCE MANAGEMENT, INC.

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be HEALTHCARE RESOURCE MANAGEMENT, INC. The principal place of business of this corporation shall be 4522 Spruce Street, Suite 200B, Tampa, Florida 33607.

ARTICLE II. DURATION

This corporation is to exist perpetually, commencing with the filing of these Articles of Incorporation with the Department of State.

ARTICLE III. GENERAL PURPOSES

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, county, territory or nation.

ARTICLE IV. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is five hundred (500) shares of common stock having a par value of one dollar (\$1.00) per share.

ARTICLE V. PREEMPTIVE RIGHTS

Every shareholder upon the sale for cash of any new stock of this corporation of the same kind, class, or series as to that which he already holds, shall have the right to purchase his pro rata share thereof at the price at which it is offered to others. Every shareholder who wishes to sell his shares shall give first refusal in the sale of his shares to the corporation, and thereafter to other shareholders.

ARTICLE VI. ADDRESS

The street address of the initial registered office of the corporation shall be 4522 Spruce Street, Suite 200B, Tampa, Florida 33607, and the name of the initial registered agent of the corporation at that address is DIANNE M. FINN.

ARTICLE IX. SUBSCRIBER

The name and street address of the subscriber to these Articles of Incorporation is:

DIANNE M. FINN

17700 Hanna Road  
Lutz, Florida 33549

IN WITNESS WHEREOF, the undersigned has hereunto set her hand and seal on this 15th day of April, 1996.

  
DIANNE M. FINN

STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 15th day of April, 1996 by DIANNE M. FINN.

  
NOTARY PUBLIC  
State of Florida at Large

MY COMMISSION EXPIRES:

November 30, 1999

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

PURSUANT TO THE PROVISIONS OF SECTION 607.0601 or 617.0601, 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: HEALTHCARE RESOURCE  
MANAGEMENT, INC.

2. The name and address of the registered agent and office is:

DIANNE A. FINN  
(Name)  
17700 HANNA Rd  
(P.O. Box not acceptable)  
Lutz, Florida 33549  
(City/State/Zip)

FILED  
MAY 24 AM 9:02  
TALLAHASSEE FLORIDA

*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)

5/20/96  
(Date)