

P96000060918

TRANSMITTAL LETTER

FILED
96 JUL 19 AM 11:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Department of State
Division of Corporations
P. O. Box 8327
Tallahassee, FL 32314

300001899553
-07/19/96--01069--004
****122.50 ****122.50

SUBJECT: JEA Healthcare Consultants, Incorporated
(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:

Johnette Elizabeth Azoulay

Name (printed or typed)

3672 N.W. 83rd Lane

Address

Sunrise, Florida 33351

City, State & Zip

(954) 741-0111

Daytime Telephone number

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

7-22-96

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.

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SECRET
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: JEA Healthcare Consultants, Incorporated

ARTICLE II PRINCIPAL OFFICE

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

3672 N.W. 83rd Lane
Sunrise, Florida 33351

ARTICLE III SHARES

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

Ten (10) Each

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Johnette Elizabeth Azoulay
3672 N.W. 83rd Lane
Sunrise, Florida 33351

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):

Johnette Elizabeth Azoulay / President/CEO
3672 N.W. 83rd Lane
Sunrise, Florida 33351

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

16 day of July, 19 96

(An additional article must be added if an effective date is requested.)



Signature

Signature

Signature

Notarization is not required

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

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

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TALLAHASSEE, FLORIDA

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: IEA Healthcare Consultants, Incorporated

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

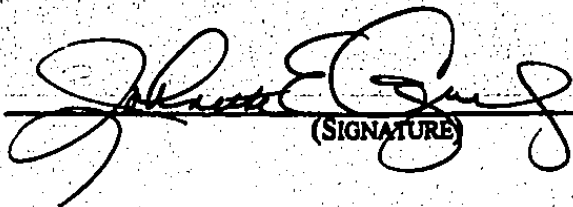
Johnette Elizabeth Azoulay

(NAME)

3672 N.W. 83rd Lane
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

Sunrise, Florida 33351
(CITY/STATE/ZIP)

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)


(DATE)