# P96000074241

TRANSMITTAL LETTER

TAULE SHOW

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

SUBJECT: HEALTH SOLUTIONS INC.

200001916972 -08/08/96--01093--008 \*\*\*\*131.75 \*\*\*\*131.25 |3/25

Enclosed is an original and one (1) copy of the Articles of Incorporation and our check for  $\frac{3}{131.25}$ .

W96-16842 502

FROM:

CHRISTINE L. THOMAS 40 West Nine Mile Road #342 Pensacola, Florida 32534

ala 1/4



August 13, 1996

CHRISTINE L. THOMAS 40 WEST NINE MILE ROAD, #342 PENSACOLA, FL 32534

SUBJECT: HEALTH SOLUTIONS INC. Ref. Number: W96000016842

We have received your document for HEALTH SOLUTIONS INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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) 487-6927.

Kathy Hyman Document Specialist

Letter Number: 196A00038387

# ARTICLES OF INCORPORATION

96 SEP -3 PM 3:45

OF Medical Health Solutions, Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Act, hereby adopts the following Articles of Incorporation.

## ARTICLE I NAME

The name of the corporation shall be: Medical Health Solutions, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 40 West Nine Mile Road, #342, Pensacola, Florida 32534.

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One Thousand (1000) Shares,

# ARTICLE IV REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: Christine L. Thomas 40 West Nine Mile Road, #342 Pensacola, Florida 32534

# ARTICLE V INCORPORATORS

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

Christine L. Thomas 40 West Nine Mile Road, #342 Pensacola, Florida 32534

Christine L. Thomas

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

96 SEP 3 71 3 45 Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned get corporation, organized under the laws of the State of Florida, submits the following statement in 24 designating the registered office/agent, in the State of Florida.

1. The Name of the corporation is: Medical Health Solutions, Inc.

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

Christine L. Thomas

40 West Nine Mile Rond, #342

Pensacola, Florida 32534

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 OBLIGATION OF MY POSITION AS REGISTERED AGENT.