

P97000010352

TRANSMITTAL LETTER

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

800002072369--9
-01/29/97--01052--004
*****78.75 *****78.75

SUBJECT:

DYNASTI HEALTHCOR, INC.

(Proposed corporate name - must include suffix)

FILED
91 JAN 29 PM 1:57
TALLAHASSEE, FLORIDA

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:

CLIFF JAGGER

Name (Printed or typed)

4260 NW 1 AVE. #54

Address

BOCA RATON, FLA. 33431

City, State & Zip

561. 393. 3977

Daytime Telephone number

6 00000000

FEB 3 1997

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

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:

DYNASTI HEALTHCOR, INC.

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ARTICLE II PRINCIPAL OFFICE

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

*4260 NW 1 AVE. #54
BOCA RATON, FLA. 33431*

ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*CLIFF TAGGER
4260 NW 1 AVE. #54
BOCA RATON, FLA. 33431*

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):


CLIFF JAGGER
4260 NW 1 AVE. #54
BOCA RATON, FLA 33431

DREW GRIFFITH
9060 REDOAK LN.
BOCA RATON, FLA 33428

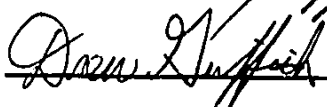
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

JAN day of 27, 19 97

(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**

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 DYNASTI HEALTHCOR, INC.

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

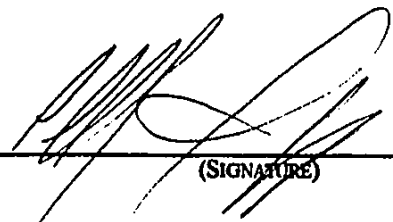
CLIFF JAGGER
(NAME)

4260 NW 1 AVE. #54
(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

BOCA RATON, FLA 33431
(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)

1.27.97
(DATE)