

P97000022539

LAZARUS CORPORATE INDUSTRIES, INC.

Requestor's Name

890 S.W. 87 AVENUE, SUITE: 16

Address

MIAMI, FLORIDA 33174 (305)552-5973

City/State/Zip

Phone #

LOCAL REPRESENTATIVE TALLAHASSEE

200002111512-4
03/12/97-01089 003
***122.50 ***122.50

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. CCA HEALTH SERVICES INC.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
97 MAR 12 PM 2:19
TALLAHASSEE FLORIDA

RECEIVED
97 MAR 12 AM 11:04
DIVISION OF CORPORATION

ARTICLES OF INCORPORATION

FILED
97 MAR 12 PM 2:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

CCA HEALTH SERVICES INC.

ARTICLE II PRINCIPLE OFFICE

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

7220 N.W. 36 Street
Miami, Fl. 33166

ARTICLE III SHARES

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

SHARE : 100
PAR VALUE: \$ 1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

HENRY FERNANDEZ
200 EAST 61ST STREET
HIALEAH, FL. 33013

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) :

(P/ VP / S / T)

HENRY FERNANDEZ
200 EAST 61st STREET
HIALEAH, FL. 33013

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 10th day of MARCH, 1997.



Signature

Signature

Signature

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

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/ REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/ registered agents, in the State of Florida.

1. The name of the corporation is: CCA HEALTH SERVICES INC.

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

HENRY FERNANDEZ

NAME

200 EAST 61st STREET

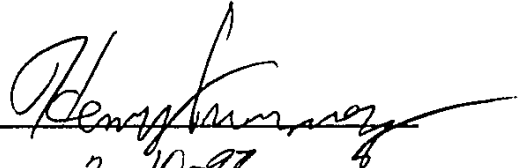
(P.O. BOX NOT ACCEPTABLE)

HIALEAH, FL. 33013

(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 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 positions as registered agent.

SIGNATURE



DATE

3-10-97

FILED
97 MAR 12 PM 2:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA