

TRANSMITTAL LETTER

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

SUBJECT: Group Health Systems, Inc.
(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

Please return the photocopy to me with the filing date stamped on it.

800002265838---1
-08/13/97--01070--0003
*****70.00 *****70.00

FROM:

Tina Berry
Name (printed or typed)

4051 Berryhill Road
Address

Pace, FL 32571
City, State & Zip

904-994-6323
Daytime Telephone Number

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

97 AUG 13 AM 9:42

FILED

TM-8/14/97

Articles of Incorporation

FILED
97 AUG 13 AM 9:42
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

1. The name of the corporation shall be:

Group Health Systems, Inc.

2. The principal place of business and mailing address of the corporation is:

4051 Berryhill Road., Pace, FL 32571

3. The corporation shall have the authority to issue 1,000 shares of stock.

4. The registered agent of the corporation is Tina Berry and the registered street address is 4051 Berryhill Road, Pace, Florida 32571.

5. The initial Board of Directors shall have 1 member(s) whose name(s) and address(es) is/are as follows: Tina Berry 4051 Berryhill Road, Pace, FL 32571

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is Tina Berry whose street address is 4051 Berryhill Road, Pace, FL 32571

Dated 6/16/97

Tina Berry
Incorporator

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 am familiar with and accept the obligations of my position as registered agent.

Dated 6/16/97

Tina Berry
Registered Agent