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4/28/98

# FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

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TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC.

ACCT#: 071001002335

CONTACT: LIDIA FERNANDEZ

FAX #: (305)716-0346

PHONE: (305)599-0839

NAME: MEDCORP HEALTH SYSTEMS, INC. AUDIT NUMBER..... H98000007958

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT, OF STATUS...1

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#### ARTICLES OF INCORPORATION

98 APR 28 PM 2: 39

OF

SECRETARY OF STATE TALLAHASSEE, FLORIDA

### MEDCORP HEALTH SYSTEMS, INC.

#### ARTICLE I. NAME

The name of this corporation is:

#### MEDCORP HEALTH SYSTEMS, INC.

#### ARTICLE II. DURATION

This corporation shall have perpetual existence, unless sooner dissolved in accordance with the laws of the State of Florida.

#### ARTICLE III. PURPOSE

This corporation is organized for the purpose of providing services as a MANAGEMENT SERVICE ORGANIZATION and transacting any and all business permitted under the laws of the United States and of the State of Florida.

#### ARTICLE IV. CAPITAL STOCK

This corporation is authorized to issue FIVE HUNDRED (500) shares of COMMON STOCK, with a par value of TEN (\$10.00) dollars each.

#### ARTICLE V. AMOUNT OF CAPITAL

The amount of capital with which this corporation will begin business is not less than FIVE THOUSAND (\$5,000.00) DOLLARS.

#### ARTICLE VI. PREEMPTIVE RIGHTS

Every shareholders upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

PREPARED BY: FELIX M. CARCERES 1035 SW 87 Ave. Miami, Fl. 33175 (305) 262-9502

ARTICLE VII. INITIAL REGISTERED OFFICE, AGENT AND PRINCIPAL OFFICE

The street address of the initial registered office of this corporation is: 2301 S.W. 9<sup>TH</sup> STREET MIAMI. FL. 33135

The name of the initial registered agent of this corporation is:

PATRIA GIRALDEZ

The corporation principal office shall be:

2301 S.W. 9<sup>TH</sup> STREET

MIAMI, FL. 33135

ARTICLE VIII. INITIAL BOARD OF DIRECTORS

This corporation shall have (ONB) director(s), initially. The number of director(s) may be either increased of diminished from time to time by the bylaws but shall never be less than ONE (1).

The name(s) and address (es) of the initial Board of Director(s) of this corporation is (are):

PATRIA GIRALDEZ 2301 S.W. 9<sup>TH</sup> STREET MIAMI, FL. 33135

#### ARTICLE IX. INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

#### ARTICLE X. INCORPORATORS

The name and address of the person(s) signing these Articles of Incorporation is (are):

PATRIA GIRALDEZ 2301 S.W. 9TH STREET, MIAMI FL 33135

IN WITNESS THEREOF, we, being all of the original subscribers and incorporators of this Corporation for the purpose of forming a Corporation, do make and file these Articles of Incorporation with the Secretary of State of the State of Florida, and accordingly set our hands and seal this 24th day of April 1998.

Patria GIRALDEZ
PATRIA GIRALDEZ

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

WITNESS my hands and official seal in the City of Miami, County of Miami-Dade and State of Florida, this 24th day of April , 1998.

> NOTARY PUBLIC STATE OF FLORIDA AT LARGE

H98000007958

## CERTIFICATE DESIGNATING DOMICILE FOR THE SERVICE OF PROCESS WITHIN THE STATE OF FLORIDA NAMING AGENT WHO PROCESS MAY BE SERVED

In pursuance of Chapte compliance with said A	r 48,091, Florida Statutes, the folic	wing is submitted, in
First-That	MEDCORP HEALTH SYSTEM	S, INC.
qualified to do business 2301 S.W.	under the laws of the State of Flo 9th Street	rida with its principal office at
the City of Miami appointed	County of Miami-Dade PATRIA GIRALDEZ	State of Florida has
City of Niami agent to accept service	County of Miami-Dade	. State of Florida. as its

#### ACKNOWLEDGMENT

Having been named to accept service of process for the above stated Corporation, at place designated in this Certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of said Act, relative to keeping open said office.

Sworn to and subscribed before me.

this 24th day of April

STATE OF FLORIDA AT