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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

FaxiNumber

: (850)922-4001

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335

Phone

: (305)599-0839

Fax Number

: (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

CHILDREN PLUS HEALTH CENTER PA

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Certificate of Status	0
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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 31, 1999

FAS-T CORP.

SUBJECT: CHILDREN PLUS HEALTH CENTER PA

REF: W99000007730

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must list at least one incorporator with a complete business street

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Neysa Culligan Document Specialist

FAX Aud. #: H99000007618 Letter Number: 199A00016304

ARTICLES OF INCORPORATION OF CHILDREN PLUS HEALTH CENTER, PA

ARTICLE I- NAME

The Name of this Corporation is CHILDREN PLUS HEALTH CENTER, PA

ARTICLE II-DURATION

This corporation shall have a perpetual existence commencing on the Date of Filing.

ARTICLE III-PURPOSE

This Corporation may engage in any activity of business permitted under the laws of the United States and the State of Florida, Medical Practice.

ARTICLE IV - CAPITAL STOCK

This Corporation is authorized to issue 500 shares of One Dollar (\$1.00) par value common stock, which shall be designated "Common Shares".

ARTICLE V- INITIAL REGISTERED OFFICER AND AGENT

The name and street address of the initial registered officer of this corporation: Sergio Rodriguez, MD, 1275 NW 170 Ave., Pembroke Pines, FJ 33028.

The Principal Place of Business of the Corporation shall be: 6300 South Dixie Hwy Ste. 202, West Palm Beach, Fl 33405.

ARTICLE VI- INITIAL BOARD OF DIRECTORS

This Corporation shall have two (2) Directors initially. The number of Directors may be increased or decreased from time to time by the by-laws, but shall never be less than one (1). The names and addresses of the initial Directors are:

A TA BATAGE.	ADDRESS		
Sergio Rodriguez, MD President - 95%	1275 NW 170 Ave.	24S	
1) esident • 95%	Pembroke Pines, Fl 33028		
Elizabeth Rodriguez Treasurer- 5%	1275 NW 170 Ave.	₹	
	Pembroke Pines, FI 33028	~~	O
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		7 5	

Prepared By: Demar Enterprises Accounting Services, Inc. 1550 West 84th Street Suite 77, Hislanh, Florida 33014
Phone: (305) 558-4947 Pax: (305) 821-9794

NAME

ARTICLE VII- LAWS

The by-laws of this Corporation may be adopted, altered, amended or repealed by either the Stockholder (s) or Director (s).

ARTICLE VIII- INDEMNIFICATION

The Corporation shall indemnify any Officer or Director, or any former Officer or Director, to the full extent permitted by law.

ARTICLE EX- PREEMPTIVE RIGHTS

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

ARTICLE X-INCORPORATOR

The person signing these articles is Sergio Rodriguez, MD. 1275 NW 170th Ave.
Pembroke Pines, F1 33028

ARTICLE XI- AMENDMENT

This Corporation reserves the right to amended or repeal any provisions contained in these Articles of Incorporation, in accordance with the provisions of the Florida General Corporation Act.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation, this 30 days of March of 1999.

President

Prepared By: Demar Enterprises Accounting Services, Inc. 1550 West 84th Street Suite 77, Hislanh, Florida 33014
Phone: (305) 558-4947 Fax: (305) 821-9794

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statues, the undersigned corporation, organized under the laws on the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

First that CHILDREN PLUS HEALTH CENTER, PA desiring to organize under the laws of the State of FLORIDA with its principal office as indicated in the Articles of Incorporation at County of Miami Dade and has named Sergio Rodriguez, as its agent to accept service of process within this state.

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.

Sergio Rodriguez Registered Agent

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SECRILIARY OF STATE
TALLAHASSEE, FLORIDA