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TRANSMITTAL LETTER

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

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-10/18/99--01091--007
*****78.75 *****78.75

Subject Patients Healthcare Resources, Inc.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$122.50
Filing Fee
& Certified Copy
(ADDT'L COPY REQ'D)

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate
(ADDT'L COPY REQ'D)

FROM:	Philip K. Akalp
	26500 West Agoura Road, #361 Calabasas, California 91302

FILED
1999 OCT 18 PM 12:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles. Provide TWO copies if you have requested a certified copy as designated in the boxes above.

A. Howell OCT 20 1999

FILED

1999 OCT 18 PM 12: 25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
Patients Healthcare Resources, Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida business Corporation Act, hereby adopts the following articles of incorporation.

ARTICLE I NAME

The name of the Corporation shall be: Patients Healthcare Resources, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Patients Healthcare Resources, Inc.
C/o NRAI Services, Inc.
526 East Park Avenue
Tallahassee, Florida 32301

ARTICLE III SHARES

The number of shares that this corporation is authorized to have outstanding at any one time is: 1,500 shares at \$1.00 par value per share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS


The name and Florida street address of the initial registered agent is:

NRAI Services, Inc.
526 East Park Avenue
Tallahassee, Florida 32301

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:


Philip K. Akalp
26500 West Agoura Road, #361
Calabasas, California 91302


Philip K. Akalp, Incorporator

10/11/99

Date

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.


NRAI Services, Inc., Registered Agent

10/11/99

Date