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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

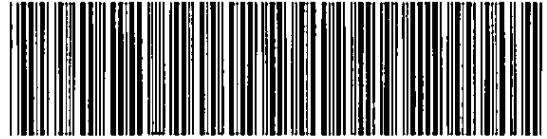
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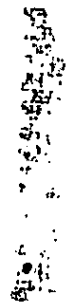
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# COVER LETTER

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

**SUBJECT:** COMMUNITY HEALTH NETWORKS OF BROWARD, 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 of  
Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

FROM: ELIZABETH FERGUSON  
Name (Printed or typed)

1800 N.W. 49th Street, Suite 120  
Address

FORT LAUDERDALE, FL 33309  
City, State & Zip

954-473-7026  
Daytime Telephone number

erferguson@browardhealth.org

E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION  
OF  
COMMUNITY HEALTH NETWORKS OF BROWARD, INC.**

*(A Florida Not For Profit Corporation)*

Pursuant to Section 617.0202 of the Florida Not of Profit Corporation Act, the Articles of Incorporation ("Articles") of Community Health Networks of Broward, Inc., a Florida not-for-profit corporation, are hereby set forth as follows:

**ARTICLE I  
NAME**

The name of the Corporation is Community Health Networks of Broward, Inc. (the "Corporation").

**ARTICLE II  
PRINCIPAL OFFICE**

The address of the principal office of the Corporation is 1700 NW 49th Street, Fort Lauderdale, FL 33309 or at such other location as may be determined by the Board of Directors of the Corporation.

**ARTICLE III  
PURPOSES**

The Corporation is organized and shall be operated exclusively for charitable, educational and scientific purposes, shall engage in all activities properly related to the foregoing, and shall be operated in accordance with the provisions of §501(c)(3) of the Internal Revenue Code of 1986, as the same may be amended from time to time, and any subsequent federal tax law (the "Code"). The Corporation shall not engage, directly or indirectly, in any activity that would prevent it from qualifying, and continuing to qualify, under § 501(c)(3) of the Code or that would be prohibited by the Florida Not For Profit Corporation Act (the "Act"). Without limiting the generality of the foregoing, the purposes of the Corporation shall include:

- A. To facilitate the provision of primary care health services via a community health center, with an emphasis on medically underserved communities, and to manage, operate, maintain, support and otherwise advance charitable, educational and benevolent activities in the field of behavioral and physical health care, health and behavioral health education and training, scientific research, health facilities, health management and other related fields in order to advance the health and well-being of medically underserved consumers, families, and communities;
- B. To promote community awareness of the services provided by the Corporation;
- C. To the extent not inconsistent with the activities that may be carried on by a corporation described in §501(c)(3) of the Code, contributions to which are deductible under §170(c)(2) of the Code, the Corporation shall be empowered to do all acts and things as from time to time may be necessary or expedient as a means of accomplishing the foregoing purposes, including those things permitted by the laws of the State of Florida pertaining to Corporation's not for profit status, as such laws now permit as set forth in Section 617.0302 of the Act, which powers are included herein by reference, or may henceforth provide.

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**ARTICLE IV**  
**INCORPORATOR**

The Corporation shall have one Incorporator whose name and address is as set forth below:

Brett Bauman, Esq  
1800 N.W. 49<sup>th</sup> Street,  
Fort Lauderdale, FL 33309

**ARTICLE V**  
**MEMBERSHIP**

The Corporation shall have no members.

**ARTICLE VI**  
**TERM OF EXISTENCE**

The term of the Corporation shall be perpetual.

**ARTICLE VII**  
**BOARD OF DIRECTORS AND MANNER OF ELECTION**

The business and affairs of the Corporation shall be managed by its Board of Directors. The conditions, qualifications and requirements regarding the Board of Directors, including without limitation the manner in which directors are elected, voting rights and reserved powers, shall be as stated in the Bylaws of the Corporation, as may be amended from time to time. The following persons shall serve as initial directors of the Corporation:

William C. Spencer  
Christopher H. Bates  
Rico Petrocelli

The initial directors of the Corporation shall be divided into two groups. Directors in Group 1 shall have an initial term of two (2) years, Directors in Group 2 shall have an initial term of three (3) years.

**ARTICLE VIII**  
**REGISTERED OFFICE AND AGENT**

The street address of the registered office of the Corporation is 1800 NW 49th Street, Fort Lauderdale, FL 33309 and the name of its registered agent at such address is Gerald Del Amo, Esq.

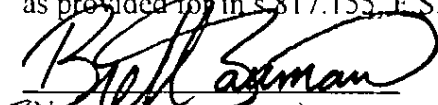
**ARTICLE IX**  
**DISTRIBUTION OF ASSETS UPON DISSOLUTION**

Upon the dissolution or winding up of the Corporation, all assets remaining after payment (or provision for payment) of all debts and liabilities of the Corporation shall be distributed, as set forth in the bylaws, for one or more exempt purposes within the meaning of §501(c)(3) of the Code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the Corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

**ARTICLE X**  
**AMENDMENTS**

This Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third-degree felony as provided for in s. 817.155, F.S.

  
\_\_\_\_\_  
(Name of Incorporator)

10/6/21  
Date

Brett Bauman  
Print Name

Having been named as registered agent to accept services of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

  
\_\_\_\_\_  
Registered Agent Signature

10/6/21  
Date

Gerald Del Amo  
Print Name