P00000080491

TRANSMITTAL LETTER

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

200003366222--0
-08/21/00--01129--004
*****78.75 *****78.75

SUBJECT: Achilles Chiropractic and Sports Medicine 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 of Status

ADDITIONAL COPY REQUIRED

FILED
00 AUG 21 AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FROM: MIKE R. MARCELL D.C.
Name (Printed or typed)

1100 OAKBRIDGE PKWY. #141
Address

LAKELAND FL 33803
City, State & Zip

(863) 607-6141
Daytime Telephone number

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

E CHECKED AUG 2 5 2000

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Achilles Chiropractic and Sports Medicine Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Achilles Chiropractic and Sports Medicine Inc.
39040 US Hwy 19
Tarpon Springs, FL 34689-3957

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide chiropractic and medical services

FILED
00 AUG 21 AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

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

MIKE R. MARCELL, D.C.
1100 OAKBRIDGE PKWY. #141
LAKELAND, FL 33803

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

MIKE R. MARCELL, D.C.
1100 OAKBRIDGE PKWY. #141
LAKELAND, FL 33803

****

Having been named as registered agent to accept service 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

M. R. Marcell D.C. — 8-17-00

Signature/Registered Agent — Date

M. R. Marcell D.C. — 8-17-00

Signature/Incorporator — Date