

TRANSMITTAL LETTER

PO2000098364

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

600007600456--7
-09/09/02--01063--001
*****78.75 *****78.75

Subject BOTOX WORKS, P.A.

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:	Emmanuel G. Acosta
	5850 Marlake Dr. Orlando, Florida 32809

02 SEP -9 AM 8:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

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.

Bm 9/12

ARTICLES OF INCORPORATION
OF
BOTOX WORKS, P.A.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Professional Service Corporation and Limited Liability Company Act, 621 F.S. hereby adopts the following articles of incorporation.

ARTICLE I NAME

The name of the Corporation shall be: BOTOX WORKS, P.A.

ARTICLE II PRINCIPAL OFFICE

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

5850 Marlake Dr.
Orlando, Florida 32809

ARTICLE III PURPOSE

The specific purpose for which the corporation is being formed is: The practice of Medicine specializing in Pain Management and Botox injections.

ARTICLE IV SHARES

The number of shares that this corporation is authorized to have outstanding at any one time is: 1500 at \$0.01 par value per share.

ARTICLE V INITIAL DIRECTORS

The name(s) and address(s) of the initial Director(s) is/are:

Emmanuel G. Acosta
5850 Marlake Dr.
Orlando, Florida 32809

ARTICLE VI REGISTERED AGENT

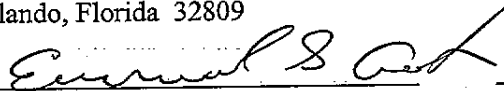
The name and Florida street address registered agent is:

Emmanuel Y. Acosta
5316 Bamboo Ct. # 501
Orlando, Florida 32811

ARTICLE VII INCORPORATOR

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

Emmanuel G. Acosta
5850 Marlake Dr.
Orlando, Florida 32809



Emmanuel G. Acosta, Incorporator

9/5/02

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.



Emmanuel Y. Acosta, Registered Agent

9/5/02

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 SEP -9 AM 8:15

FILED