P08000034321

Division of Corporations

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000084398 3)))

H08000084398ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : EXPRESS CORPORATE FILING SERVICE INC.
Account Number : I20000000146
Phone : (305)444-4994
Fax Number : (305)444-4977

RECEIVED
08 APR -2 PM 4:54
DIVISION OF CORPORATION

FLORIDA PROFIT/NON PROFIT CORPORATION

HALL CHIROPRACTIC CENTER INC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	$78.75

FILED
2008 APR -2 AM 11:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

cd. 4-3

FILED

(((H08000084398)))

2008 APR -2 AM 11:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

HALL CHIROPRACTIC CENTER INC

ARTICLE II PRINCIPAL OFFICE

The principle street address and mailing address, if different is:

5040 N.W. 7st STREET STE 710
MIAMI FLORIDA 33126

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

500 SHARES AT $1.00 EACH

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

WILLIAM HALL - AS PRESIDENT
1089 W GRANADA BLVD STE # 3
ORMOND BEACH, FL 32174

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

WILLIAM HALL
1089 W GRANADA BLVD STE # 3
ORMOND BEACH, FL 32174

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

WILLIAM HALL
1089 W GRANADA BLVD STE # 3
ORMOND BEACH, FL 32174

****

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

X _____ 04/01/2008
Signature/Registered Agent — Date

X _____ 04/01/2008
Signature/Incorporator — Date