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Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION ABOUT WELLNESS CHIROPRACTIC CENTER, INC.

Certificate of Status	0
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ARTICLES OF INCORPORATION ALLEGE OF STA

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

ARTICLE I NAME

The name of the corporation shall be:

ABOUT WELLNESS CHIROPRACTIC CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6820 NOVA DRIVE #104 DAVIE, FLORIDA 33317

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 1,500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is/are:

PRESIDENT
ROSALYN W MILLER
6820 NOVA DRIVE #104
DAVIE, FLORIDA 33317

VICE PRESIDENT TERRI ALESSI EDMISTON 6820 NOVA DRIVE #104 DAVIE, FLORIDA 33317

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ARTICLE VI REGISTERED AGENT

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

TERRI ALESSI EDMISTON 6820 NOVA DRIVE #104 DAVIE, FLORIDA 33317

ARTICLE VII INCORPORATOR

The name and street address of the incorporator is:

ROSALYN W MILLER 6820 NOVA DRIVE #104 DAVIE, FLORIDA 33317

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.

TERRI ALESSI EDMISTON / Registered Agent

Date

ROSALYN W MILLER /Incorporator

Date

3~4-11