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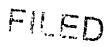
INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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	PIC	K UP:	06/22/2020	
	CERTIFIED COPY		 	
	РНОТОСОРУ			
	CUS	<u></u>		
	FILING	INC		
	ONAPHIN, INC.			
(C	ORPORATE NAME AND DOCU	MENT #)		
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L CT	IONS:			
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ARTICLES OF INCORPORATION

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

2020 JUN 22 AM 11: 16

RTICLE I NAMI	Bonaphin Inc		- AUTI:		
	Bonaphin, Inc.	·	SECRETARY OF STA		
RTICLE II PRIN			FL THE THE PERSON OF THE PERSO		
22 Bristol Lane	Principal <u>street</u> address		Mailing address, if different is:		
Naples, FL 34112					
					
					
he nurnose for which	OSE the corporation is organized is:	sacting any and all lawfu	l business.		
ar perposition which	me corporation is organized is,				
	· · · · · · · · · · · · · · · · · · ·				
					
					
RTICLE V INITIA	L OFFICERS AND/OR DIRECTOR Susan Kelleher, DPT		William Hogan, DVPS		
Address	122 Bristol Lane	Name and Title:	229 Meadowbrook Road		
	Naples, FL 34112	//dd/c33.	Orchard Park, NY 14127		
Name and Title:		Name and Title:			
Address					
Addiess		Address:			
		 .			
Name and Title:		Name and Title:			
Address					
, 333		Address:			
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Name and Title:Address					
					
ARTICLE VI The name and F	REGISTERED AGENT Street address (P.O. Box NOT accepta	hla) of the maintained arms in			
Name:	Jeff Novatt, Esq.	ole) of the registered agent is:			
Address:	1415 Panther Lane, Suite 327	SEC:	4-		
	Naples, FL 34109		EC TA		
			LA JUN TI		
	<u>INCORPORATOR</u>		UN 22 ANIII TAKY OF STANKASSEE, I		
The name and a	ddress of the Incorporator is:		SIGN A III		
Name:	Jeff Novatt, Esq.		D III: 16		
Address:	1415 Panther Lane, Suite 327	TE TO	TE 16		
	Naples, FL 34109				
ABORIOLOGICA	5				
Effective date. if	EFFECTIVE DATE: other than the date of filing:	(OBTION OF			
(If an effective d	late is listed, the date must be specific and c	. (OPTIONAL) annot be more than five days pri	or or 90 days after the		
Note: If the date	inserted in this block does not meet the applic	poble statutes. Elianas	12.1		
the document's e	ffective date on the Department of State's reco	rds.	this date will not be listed as		
Having been nan	ned as registered agent to accept service of pr	ocess for the above stated cornera	tion at the place decionated in		
this certificate, I d	am familiar with and accept the appointment of	is registered agent and agree to act	t in this capacity		
_	1100 VSI		n6/22/2020		
	Required Signature/Registered Agent		06/22/2020		
I submit this doc	ument and affirm that the facts stated herein	are true. I am aware that the fals	se information submitted in a		
avcument to the L	Department of State constitutes a third degree	felony as provided for in s.817.155,	, F.S.		
	WINT, ESA		06/22/2025		
Requi	fed Signature/Incorporator		06/22/2020 Date		