# 97000036128



THE UNITED STRIES	P
ACCOUNT NO. : 07210000032	
REFERENCE : 338822 81609A	
AUTHORIZATION :	
COST LIMIT : \$	
ORDER DATE: April 22, 1997	
ORDER TIME : 9:03 AM	
ORDER NO. : 338822-005 1 []	0021504518
CUSTOMER NO: 81609A	04/22/9701007022 *****70.00 *****70.00
CUSTOMER: Hilda M. Porro, Esq HILDA M. PORRO, P.A.	
Suite E 12769 W. Forest Hill Boulevard Wellington, FL 33414	917
DOMESTIC FILING	10
NAME: CENTER FOR COMPREHENSIVE WELLNESS, P.A.	E STEELS
EFFECTIVE DATE:	
X ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING.	
CERTIFIED COPY  X PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Gail L. Shelby EXAMINER'S INITIALS:	-
	A Comment

RA7-9260



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 22, 1997

CSC NETWORKS 1201 HAYS ST. TALLAHASSEE, FL 32301-2607

SUBJECT: CENTER FOR COMPREHENSIVE WELLNESS, P.A. Ref. Number: W97000009260

We have received your document for CENTER FOR COMPREHENSIVE WELLNESS, P.A. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

THE REGISTERED AGENT LISTED IN YOUR ARTICLES OF INCORPORATION MUST BE CONSISTENT THROUGHOUT THE DOCUMENT.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6052.

Sandy Ng Document Specialist

Letter Number: 997A00020562



#### ARTICLES OF INCORPORATION

OF

# CENTER FOR COMPREHENSIVE WELLNESS, P.A.

ARTICLE I - NAME

The name of this corporation is

CENTER FOR COMPREHENSIVE WELLNESS, P.A.

## ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 1905 Clint Moore Road, Suite 301
Boca Raton, FL 33496

#### ARTICLE III - PURPOSE

This Corporation is organized for the purpose of transacting any or all lawful business as a medical doctor.

#### ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue 100 shares of One Dollar (\$1.00) par value common stock which shall be designated as "Common Shares".

#### ARTICLE V - PRE-EMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation, shall have the right to purchase his pro-rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

# ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 12769 W. Forest Hill Blvd., Suite E, Wellington, Florida 33414 and the name of the initial registered agent of this corporation at that address is Hilda M. Porro.

## ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have one director constituting the initial Board of Directors. The number of directors may be either increased or decreased from time to time by the bylaws, however, there shall never be less than one Director nor more than five.

7ARR 22 11 0:46

The name and address of the initial Board of Directors of the corporation is:

Enrique Rivera, PhD Robert M. Colton, MD 1905 Clint Moore Road, Suite 301 Boca Raton, FL 33496

#### ARTICLE VIII - INCORPORATOR

The name and address of the Incorporator signing these articles is: 12769 W. Forest Hill Blvd., Suite E Wellington, FL 33414

#### ARTICLE IX - INDEMNIFICATION

The corporation shall indemnify any Officer or Director or any former officer or director, to the full extent permitted by law.

#### ARTICLE X - AMENDMENT

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment hereto, by a majority vote of the Board of Directors, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned Incorporator has executed these Articles of Incorporation on the 21 day of April, 1997.

HILDA M. PORRO, Incorporator

STATE OF FLORIDA COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 2/5+
day of April, 1997, by Hilda M. Porro, P.A., who is personally known to me or who has produced \_\_\_\_\_\_\_as identification and who did take an oath.

GALL A. STORMES
MY COMMISSION # CG 803278
EXPIRES: March 9, 2001
Bonded Thru Notary Public Underwriters

Notary Public:

sign Gail a. Storse

Print COAIL A. STORMES
State of Florida at Large

My Commission Expires:

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- The name of the corporation is: CENTER FOR COMPREHENSIVE WELLNESS, P.A.
- The name and address of the registered agent and office is:

HILDA M. PORRO
12769 Forest Hill Boulevard
Suite E
Wellington, Florida 33414

Hilda M. Porro, Incorporator

Date: 42/97

Having been named to accept service of process for the above named 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 relative to the proper performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Hilda M. Porro, Registered Agent
Date: 4/21/97