

Mar 1

04/17/2010

FLORIDA RESEARCH AND FILING

8509426446

p.1

Page 1 of 1

Division of Corporations

Florida Department of State
Division of Corporations
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.

((H10000050487 3)))



H100000504873ABCZ

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 : FLORIDA RESEARCH & FILING SERVICES, INC.
Account Number : I20030000083
Phone : (850) 656-6446
Fax Number : (850) 942-6446

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED MAR - 5 2010

FILED

MAR 11 11:58

FOREIGN PROFIT/NONPROFIT CORPORATION
CHIROPRACTIC USA, INC.

Certificate of Status	0
Certified Copy	0
Page Count	85 05
Estimated Charge	\$70.00

* RESUBMITTING
w/ CORRECTIONS
PLEASE RETAIN
ORIGINAL
SUBMISSION
DATE

Electronic Filing Menu

Corporate Filing Menu

Help

MAR - 9 2010
D.A. WHITE

Mar 05 10 04:17p

FLORIDA RESEARCH AND FILI

8509426446

p.2

850-617-6381

3/5/2010 10:32:31 AM PAGE

1/001 FAX Server



March 5, 2010

FLORIDA DEPARTMENT OF STATE

Division of Corporations
FLORIDA RESEARCH & FILING SERVICES

SUBJECT: CHIROPRACTIC USA, INC.
REF: W10000011273

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is K04869 - CHIROPRACTIC U.S.A., INC..

If you have any further questions concerning your document, please call (850) 245-6934.

Loria Poole
Regulatory Specialist II
New Filing Section

FAX Aud. #: H10000050487
Letter Number: 310A00005471

P.O BOX 6327 - Tallahassee, Florida 32314

FILED

H10000050487

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

2010 MAR -4 A 11:58

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.SECRETARY OF STATE
TALLAHASSEE, FLORIDA1. Chiropractic USA, Inc.(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")CUSA National Office, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Colorado

(State or country under the law of which it is incorporated)

3. 03-0377744

(FEI number, if applicable)

4. May 17, 2001

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. upon filing(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)7. 7200 West Camino Real #300 Boca Raton, FL 33433

(Principal office address)

7200 West Camino Real #300, Boca Raton, FL 33433

(Current mailing address)

8. Licensing office

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)Name: Corporate Creations Network Inc.Office Address: 11380 Prosperity Farms Road #221EPalm Beach Gardens

(City)

, Florida 33410

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature)

By: Brian Fous, Vice President

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

H10000050487

FILED

H10000050487

2010 MAR -4 A 11:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Cory GelmonAddress: 7200 West Camino Real #300Boca Raton FL 33433Vice Chairman: Michael GelmonAddress: 7200 West Camino Real #300Boca Raton FL 33433

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Cory GelmonAddress: 7200 West Camino Real #300Boca Raton FL 33433

Vice President: _____

Address: _____

Secretary: Michael GelmonAddress: 7200 West Camino Real #300, Boca Raton FL 33433

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. Cory Gelmon, President

(Typed or printed name and capacity of person signing application)

H10000050487

H10000050487

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO**CERTIFICATE**

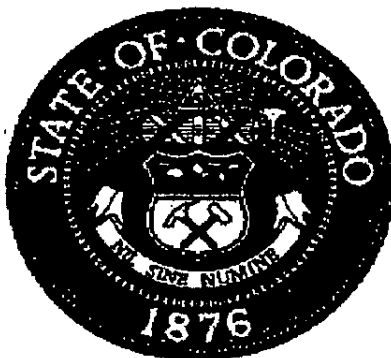
I, Bernie Buescher, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

CHIROPRACTIC USA, INC.

is a Corporation formed or registered on 05/17/2001 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20011100208.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 02/25/2010 that have been posted, and by documents delivered to this office electronically through 03/03/2010 @ 15:17:42.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 03/03/2010 @ 15:17:42 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 7590207.



Secretary of State of the State of Colorado

2010 MAR -4 A 11:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

*****End of Certificate*****

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <http://www.sos.state.co.us/cert/confirm.asp> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us> click Business Center and select "Frequently Asked Questions."

CERT_CS_D Revised 08/20/2004

H10000050487