

N00000000803

TRANSMITTAL LETTER

FILED
00 FEB - 7 PM 3:01
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

000003108490--8
-01/24/00--01116--002
*****78.75 *****78.75

SUBJECT: HOLISTIC INSTITUTE OF HEALTH, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee &
Certificate of
Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: FRED C. CURRIER
Name (Printed or typed)

1511 NW 113 AVE.
Address

PEMBROKE PINES, FL 33026
City, State & Zip

(954) 357-6513
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

D. BROWN FEB - 7 2000



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 1, 2000

FRED C. CURRIER
1511 N.W. 113TH AVENUE
PEMBROKE PINES, FL 33026

SUBJECT: HOLISTIC INSTITUTE OF HEALTH, INC.
Ref. Number: W00000002767

We have received your document for HOLISTIC INSTITUTE OF HEALTH, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.")

The registered agent must sign accepting the designation.

Please return the original and one copy of 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 (850) 487-6972.

Doris Brown
Document Specialist

Letter Number: 100A00004622

see attached

Please expedite

[Signature]

ARTICLES OF INCORPORATION
OF
Holistic Institute of Health, Inc.

FILED
00 FEB -7 PM 3:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purposes of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopts the following Articles of Incorporation.

Article I: NAME

The name of the corporation shall be Holistic Institute of Health, Inc.

Article II: PRINCIPAL OFFICE

The principal place of business and mailing address is
1511 N.W. 113 Avenue
Pembroke Pines, FL 33026

Article III: PURPOSES

The purposes for which the corporation is organized is to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of Florida. Specifically, said corporation is organized exclusively for charitable, religious, educational, and scientific purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as now enacted or hereafter amended, including, for such purposes, the making of distributions to organizations that also qualify as Section 501(c)(3) exempt organizations.

To this end, the purposes of this corporation include, but are not limited to:

- (a) To support people's ability to heal or enhance themselves – physically, emotionally, spiritually, and mentally.
- (b) To provide complementary services, education, and training in pain management, energy and massage bodywork, nutrition, exercise, and other advanced technology.
- (c) To research and improve these and other potential technologies.

Article IV: MANNER OF APPOINTMENT OF DIRECTORS

The manner in which the directors are appointed is:

The Board of Directors shall consist of one or more members, the number thereof to be determined from time to time by resolution of the Board of Directors. Appointment of directors will be made in the manner proscribed by the bylaws of the corporation.

Article V: INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent are:

Fred C. Currier
1511 N.W. 113 Avenue
Pembroke Pines, FL 33026

Article VI: INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:

Fred C. Currier
1511 N.W. 113 Avenue
Pembroke Pines, FL 33026

Article IV: LIMITATIONS

The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes, subject to the following limitations:

All funds, whether income or principal, and whether acquired by gift or contribution or otherwise, shall be devoted to said purposes. No part of the net earnings of the Corporation shall inure to the benefit of any Member, trustee, Director, officer of the Corporation, or any private individual (except that reasonable compensation may be paid for services rendered to or for the Corporation), and no Member, trustee, officer of the Corporation or any private individual shall be entitled to share in the distribution of any of the Corporation assets on dissolution of the Corporation. No substantial part of the activities of the Corporation shall consist of carrying on propaganda, or otherwise attempting, to influence legislation, and the Corporation shall not participate or intervene in (including the publishing or distributing of statements) any political campaign on behalf of (or in opposition to) any candidate for public office.

No officer or director shall be personally liable to the corporation for monetary damages for any breach of fiduciary duty by such officer or director as an officer or director notwithstanding any provision of law imposing such liability, except that, to the extent provided by applicable law, this provision shall not eliminate or limit the liability of an officer or director (i) for breach of the officer's or director's duty of loyalty to the corporation (ii) for acts or omissions not in good faith or which involve intentional misconduct or a knowing violation of law, or (iii) for any transaction from which the officer or director derived an improper personal benefit. No amendment or repeal of these provisions shall deprive an officer or director of the benefits hereof with respect to any act or omission occurring prior to such amendment or repeal.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

FILED
00 FEB -7 PM 3:01
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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.

1. The name of the corporation is: Holistic Institute
of Health, INC.

2. The name and address of the registered agent and office is:

Fred C. Carrier
(Name)
1511 NW 113 Ave.
(P.O. Box not acceptable)
Pembroke Pines, FL 33026
(City/State/Zip)

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

Fred C. Carrier February 3, 2000
(Signature) (Date)

REGISTERED AGENT/ INCORPORATOR