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FILED
95 APR 27 AM 10:15
TALLAHASSEE, FLORIDA

222 Lakeview Drive
Suite 160214
West Palm Beach, FL 33401

April 27, 1995

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

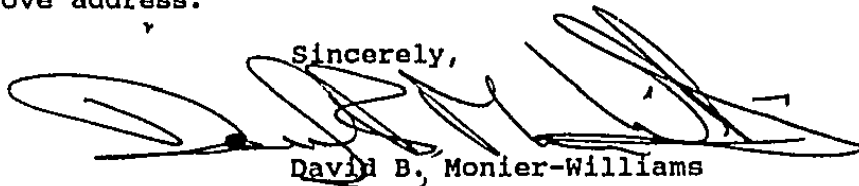
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*****70.00 *****70.00

Dear Sir:

Enclosed please find Non-Profit Articles of Incorporation and the Designation and Acceptance of Registered Agent for filing, together with our check in the amount of \$ 70.00 to cover the filing fee, certified copy charge, designation of registered agent, and charter tax.

I have also enclosed an additional copy of the Articles of Incorporation which I would appreciate having certified and returned to the above address.

Sincerely,



David B. Monier-Williams

Enclosures

ARTICLES OF INCORPORATION
OF
THE CREATIVE WELLNESS INSTITUTE CORPORATION

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RECORDED & INDEXED
TALLAHASSEE, FLORIDA

The undersigned, acting as incorporator of a corporation under the non-profit Corporation Act of the State of Florida, adopt the following articles of incorporation.

ARTICLE I

The name of the corporation is The Creative Wellness Institute Corporation.

ARTICLE II

The corporation's duration shall be perpetual.

ARTICLE III

The purposes for which the corporation is organized are to engage in any activity permitted under the laws of the United States (in which a non-profit corporation in this state is permitted to engage), through the promotion of educational activities, which result in educational benefit to recipients designated by the corporation.

ARTICLE IV

The qualifications for members and the manner of their admission shall be regulated by the by-laws.

ARTICLE V

The initial street address of the initial registered office of the corporation is 222 Lakeview Drive, Suite 160214, West Palm Beach, Florida 33461 and the name of the initial registered agent at such address is David B. Monier-Williams.

ARTICLE VI

The initial board of directors shall consist of at least three members, who need not be residents of the State of Florida.

ARTICLE VII

The names and addresses of the persons who shall serve as directors until the first annual meeting of members, or until their successors shall have been elected and qualified, are as follows:

David B. Monier-Williams

ARTICLE VIII

The name and address of the initial incorporator is as follows:

David B. Monier-Williams
222 Lakeview Drive
Suite 160214
West Palm Beach, Florida 33401

ARTICLE IX

The qualifications of the members and the manner in which they shall be selected and admitted as members of this not-for-profit corporation are more fully set forth in the By-laws of the corporation.

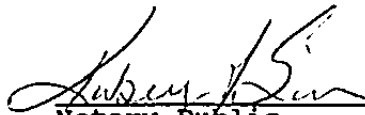
IN WITNESS WHEREOF the undersigned have made and subscribed to these articles of incorporation at 222 Lakeview Drive, Suite 160214, West Palm Beach, Florida 33401, on this _____ day of April, 1995.

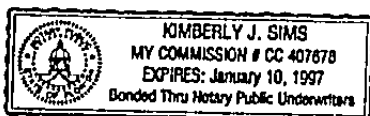

David B. Monier-Williams

STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this _____ day of April, 1995.

(SEAL)


Notary Public
State of Florida
My Commission Expires: 4/10/97



CERTIFICATE DESIGNATING REGISTERED AGENT FOR THE
SERVICE OF PROCESS IN THIS STATE
THE CREATIVE WELLNESS INSTITUTE CORPORATION

The following is submitted in compliance with law.

The Creative Wellness Institute Corporation, a not-for-profit corporation organizing under the laws of the State of Florida with its principal office located at 222 Lakeview Drive, Suite 160214, West Palm Beach, Florida 33401, hereby designates David B. Monier-Williams, as its agent at that address to accept service of process within this state.

ACCEPTANCE

I agree as Registered Agent to accept service of process; to keep the office open during prescribed hours; to put my name (and any other officers of said corporation authorized to accept service of process at the above designated address) in some conspicuous place in the office as required by law.

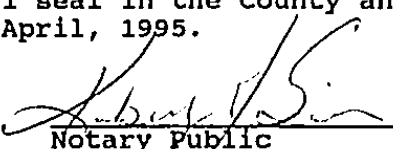

David B. Monier-Williams

STATE OF FLORIDA
COUNTY OF PALM BEACH

BEFORE ME, the undersigned authority, this day personally appeared David B. Monier-Williams, who, after being duly sworn, deposes and says that the facts and matters contained above are true and correct and that he has executed the same for the purpose expressed therein.

WITNESS my hand and official seal in the County and State last aforesaid this ____ day of April, 1995.

(SEAL)


Notary Public
State of Florida
My Commission Expires:
1/10/97

