

TRANSMITTAL LETTER

N99000003143

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

SUBJECT: CHERATION HEALTH ADVISORY INSTITUTE INC
(Proposed corporate name - must include suffix)

100002877811--5
-05/17/99--01126--019
*****87.50 *****87.50

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

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

87.50

ADDITIONAL COPY REQUIRED

FROM: LEO WEINBERG
Name (Printed or typed)

320 N.W 100TH AVE
Address

PLANTATION, FL. 33324
City, State & Zip

954-473-2255
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 MAY 17 PM 2: 37

FILED

T. SMITH MAY 20 1999

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be:

CHELATION HEALTH ADVISORY INSTITUTE, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

320 N.W. 100TH AVE
FORT LAUDERDALE, FL. 33324

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is(are):

TO EDUCATE AND INFORM THE PUBLIC ABOUT THE
EDTA CHELATION THERAPY PROCEDURES AND THEIR CHOICE
OF ALTERNATIVE OPTIONS -

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:

AS STATED IN THE BYLAWS

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

LEO WEINBERG
320 N.W. 100TH AVE
PLANTATION, FL 33324

ARTICLE VI INCORPORATOR

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

LEO WEINBERG
320 N.W. 100TH AVE
PLANTATION, FL 33324

Signature/Incorporator

Leo Weinberg

(An additional article must be added if an effective date is requested.)

Date

05-14-99

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 MAY 17 PM 2:37

FILED

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.

Leo Weinberg

Signature/Registered Agent

Date

05-14-99