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ACCOUNT NO:

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AUTHORIZATION:

ABBIE/PAUL HODGE

TYPE OF FILING:

ARTICLES OF INCORPORATION

CORPORATE NAME:

B&D CHIROPRACTIC CENTER, INC.

70003210597--8 --04/17/00--01046--006 *****78.75 *****78.75

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ARTICLES OF INCORPORATION

BED Chiropractic Center, Inc.

FILED

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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

The undersigned, acting as incorporator under the Florida Business Corporation Act, adopts the following Articles of Incorporation for BED Chroprache Center, Inc.

- 1. The name of the corporation is BED Chicopractic Center, Inc.
- The principal office of the corporation is:

5450 S. State Rd. 7 Suite 8 Ft. Lauderdale, Fl. 33314

- 3. The corporation shall have authority to issue 10,000 shares of stock, all of one class with a par value of \$.10 per share.
- - 5. The purpose of the corporation is to engage in any activity or business permitted under the laws of the United States or Florida.
 - 6. The number of directors constituting the initial board of directors is one and this name and address is one.

<u>Name</u>

David J. Dorfman

ett Greenwald

Address

511 Baysmie Dr. #208 Pt. Lauderdale, Pt. 33304

23306 Boca Chica Cr Boca Raton, Fl. 33433

	6 **
7.	The name and address of the incorporator is:
	Name Address
	David J. Dolfman 511 Bayshore Dr. #208 Pt. Lauderdale, Pt. 33304
8.	······································
	The effective date of the corporate existence pursuant to section 607,0203 of the
Florida Statut	es shall be April 1, 2000 provided such date is within five (5) business day
prior to the da	te of filing.
Excou	ted and subscribed at Boca Raton, Florida on April 13, 2000
	Dildon
	PALM BEACH
The for acknowledged or who produce this the day of	
	Notary Public My commission expires: Printed Name: RICHARD POLLARY OFFICIAL NOTARY SEAL RICHARD POLLARI COMMISSION NUMBER C C 632190 MARCH 25. 2001

Acceptance of Registered Agent

Da 3+D Chiloplactic position.	vid J. Dorfman Center, Inc.	hereby accepts and acknow	the above apported that he	ointment as re is familiar w	egistered ageni ith the obligat	ofions of that

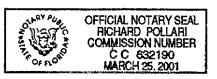
STATE OF FLORIDA COUNTY OF PALM BEACH

The foregoing Acceptaid 1. Doc	ptance of Register	ed Agent was	acknowled	lged before r	me hy
David J. Dor	Tricky WITO	is bersousif.	y known to	me, ar wha	hae produced
April , 2000.	as identification	ı, and who di	d not take a	n oath, on th	is 4 day of
-7-W101 - 1 2000.	-			-	'

Notary Public

My commission expires:

Printed Namo: RICHARO POLLAR



O APR 17 AM 10: 56