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**FLORIDA PROFIT CORPORATION OR P.A.**

**MED ONE THERAPY CENTER, INC.**

Certificate of Status	0
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**ARTICLES OF INCORPORATION**  
**FOR**  
**MED ONE THERAPY CENTER, INC.**

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

**ARTICLE I NAME**

The name of the corporation shall be:

**MED ONE THERAPY CENTER, INC.**

**ARTICLE II PRINCIPAL OFFICE**

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

**3940 W. FLAGLER ST. 2nd FL  
MIAMI, FL 33134**

**ARTICLE III NATURE**

This corporation may engage in or transact any all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, county, territory or nation.

**ARTICLE IV CAPITAL STOCK**

The maximum number shares of stock that this corporation is authorized to have outstanding at any one time is **100** shares of common stock having a par value of **\$1.00** per share.

**ARTICLE V TERM OF EXISTENCE**

This corporation shall exist perpetually.

**ARTICLE VI INITIAL OFFICERS/DIRECTORS**

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

**SERGIO MENA (P)  
3940 W. FLAGLER ST. 2nd FL  
MIAMI, FL 33134**

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**ARTICLE VII INCORPORATOR(S)**

The name(s) and address(es) of the Incorporator(s) to the Article of Incorporation are:

**SERGIO MENA  
3940 W. FLAGLER ST. 2nd FL  
MIAMI, FL 33134**

  
\_\_\_\_\_  
Signature of Incorporator

  
\_\_\_\_\_  
Date


**ARTICLE VIII REGISTERED AGENT**

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

**SERGIO MENA  
3940 W. FLAGLER ST. 2nd FL  
MIAMI, FL 33134**

Having been named as registered 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.

  
\_\_\_\_\_  
Signature of Registered Agent

  
\_\_\_\_\_  
Date

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