P9100005379

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

SUBJECT:

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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 ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Haren L. Johnson Name (Printed or typed) 6709 1st Ave S Address St. Petersburg Fl 33707 City, State & Zip		SECRETARY OF SORID	PILED FILED FILED FILED
	727-34	State/& Zip 7 - 37 elephone number		

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

10,01 (16,0)

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Health and Hearing, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6709 1ST Ave S St. Petersburg, E1 33707

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

Hearing Aid Sales and service. Hearing Testing. Primary care services

ARTICLE IV SHARES

The number of shares of stock is:

w 100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

- Karen L Johnson 6709 1STAVES St Petersburg, F1 33707

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Karen L Johnson 6709 IST ALES St Petersburg, F1 33707

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Karen L Johnson 6709 1st Ale 9 St Petersburg, Fl 33707

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent Date

| 0 4, 2001
| Date

SI JAH I MIDIS