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February 1, 2001

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 900003674969--6 -02/12/01--01137--004 *****78,75 *****78,75

RE: Articles of Incorporation for Cantonment Chiropractic Center, P.A.

Dear Sir or Madam:

Enclosed please find an original and one copy of Articles of Incorporation for Cantonment Chiropractic Center, P.A. for filing with your office. Also enclosed is our firm check in the amount of \$78.75 representing filing fee and one certified copy of the Articles of Incorporation to the undersigned.

Thank you for your cooperation in this matter.

Sincerely,

Lisa M. Durbin Legal Assistant to

ROBERT N. HEATH, JR.

/lmd Enclosures

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ARTICLES OF INCORPORATION

OF

CANTONMENT CHIROPRACTIC CENTER, P.A.

The undersigned natural person, acting hereby as Incorporator for the purpose of forming a Professional Service Corporation for profit under the provisions of Chapter 607, Florida General Corporation Act and Chapter 621, Florida Professional Service Corporation and Limited Liability Company Act, does hereby adopt the following Articles of Incorporation:

ARTICLE I - NAME OF CORPORATION

The name of this corporation shall be CANTONMENT CHIROPRACTIC CENTER, P.A.

ARTICLE II - PURPOSE

The purpose of the corporation is to engage in the practice of chiropractic medicine and the rendition of chiropractic medical services as well as to engage in any other business permitted under the laws of the State of Florida.

ARTICLE III - CAPITAL STOCK

The corporation shall be authorized to issue One Thousand shares (1,000.00) of common stock at \$1.00 per share par value and shall be issued only to a duly licensed professional in good standing who has paid consideration in lawful money, property, labor or services.

ARTICLE IV - PRINCIPAL OFFICE

The principal office of the corporation shall be 439 U.S. Highway 29, Cantonment, Florida, 32533. The mailing address shall be the same.

ARTICLE V - INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The initial registered office of the corporation shall be 439 U.S. Highway 29, Cantonment, Florida, 32533 and the initial registered agent shall be Ted D. Rice, D.C.

ARTICLE VI - INCORPORATOR

The name and address of the incorporator is Ted D. Rice, D.C., 439 U.S. Highway 29, Cantonment, Florida 32533.

ARTICLE VII - BOARD OF DIRECTORS

The corporation shall have a Board of Directors, initially consisting of one (1) person. The number of Directors may be increased from time to time by a resolution of a majority of the stockholders as provided for in the bylaws but shall, in no event, be less than one. The initial Director is Ted D. Rice, D.C., 439 U.S. Highway 29, Cantonment, Florida, 32533.

ARTICLE VIII - INFORMAL ACTION OF DIRECTORS

If all of the Directors, severally or collectively, consent in writing to any action taken or to be taken by the corporation, and the writings evidencing their consent are filed with the

Secretary of the corporation, the action shall be as valid as though it had been authorized at a meeting of the Board of Directors.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation in the State of Florida, this 27th day of Tanuary, 2001.

TED D. RICE, D.C., Incorporator

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT/REGISTERED OFFICE, IN THE STATE OF FLORIDA.

- 1. The name of the corporation is CANTONMENT CHIROPRACTIC CENTER, P.A.
- 2. The name and address of the registered agent and office is:

Ted D. Rice, D.C 439 U.S. Highway 29 Cantonment, Florida, 32533

Having been named as registered agent 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.

Ted D. Phie M.
TED D. RICE, D.C.

Dated: 01-29-01

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FILED