Division of Corporations

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Florida Department of State

Division of Corporations
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Katherine Harris, Secretary of State



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To:

Division of Corporations

Fax Number : (850)922-4001

From:

Account Name : FILINGS, INC.
Account Number : 072720000101
Phone : (850)385-6735
Fax Number : (954)791-3109

FLORIDA PROFIT CORPORATION OR P.A.

ADVANCED ALTERNATIVE MEDICINE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	95/(0)
Estimated Charge	\$70.00

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SECRETARY OF STATE
TALLAHASSI'E, FLORIDA

B. McKnight MAR 3 0 2001



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EFFECTIVE DATE

ARTICLES OF INCORPORATION OF ADVANCED ALTERNATIVE MEDICINE, INC.

THE UNDERSIGNED subscriber to these Articles of Incorporation, a natural person competent to contract, forms a corporation for profit under the laws of the State of Florida.

ARTICLE I NAME

The name of this corporation is:

ADVANCED ALTERNATIVE MEDICINE, INC.

ARTICLE II NATURE OF BUSINESS

The corporation may engage in any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE III CAPITAL STOCK

The number of shares of authorized capital stock in this corporation shall be 10,000 shares of common stock with a par value of ten (10) cents.

The capital stock may be paid for in property, labor, services, or cash, at a just valuation to be fixed by the stockholders. All of such shall be fully paid and nonassessable.

ARTICLE IV TERM OF EXISTENCE

The corporation is to exist perpetually.

ARTICLE V INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 1501 South Andrews Avenue Fort Lauderdale, Florida 33316 and the initial registered agent at that address is LYNDA M. CROCKETT

ARTICLE VI DIRECTORS(S)

This corporation shall have one (1) director(s) initially. The number of directors may be increased or diminished from time to

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time as provided in the By-Laws.

ARTICLE VII INITIAL DIRECTOR (S)

The name(s) and address(es) of the member(s) of the first Board of Directors is (are):

LYNDA M. CROCKETT 1501 South Andrews Avenue Fort Lauderdale, Florida 33316.

ARTICLE VIII PRINCIPAL OFFICE

The address of the principle office is:

1501 South Andrews Avenue, Fort Lauderdale, Florida.

ARTICLE IX SUBSCRIBER(S)

The name and address of the subscriber(s) to these Articles of Incorporation is (are):

LYNDA M. CROCKETT 1501 South Andrews Avenue Fort Lauderdale, Florida 33316.

ARTICLE X CUMULATIVE VOTING

Cumulative voting may be permitted by the terms of the By-

ARTICLE XI INDEBTEDNESS

The highest amount of indebtedness or liability to which this Corporation may at any time subject itself is unlimited.

ARTICLE XII INDEMNIFICATION OF OFFICERS AND DIRECTORS

This Corporation shall indemnify and insure its officers and directors to the fullest extent permitted by law either now or hereafter.

ARTICLE XIII BEGINNING OF CORPORATE EXISTENCE

The corporation existence of this Corporation shall commence at 8:00 A.M. on March 28, 2001.

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ARTICLE XIV MAILING ADDRESS OF CORPORATION

The mailing address of the corporation shall be:

1501 South Andrews Avenue, Fort Lauderdale, Florida 33316.

IN WITNESS WHEREOF, the undersigned subscriber(s) has/have executed these Articles of Incorporation this 28th day of March, 2001.

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STATE OF FLORIDA)
)SS
COUNTY OF BROWARD)

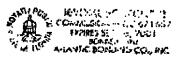
I HEREBY CERTIFY that before me, an officer duly authorized to administer waths and take acknowledgements, personally appeared LYNDA M. CROCKETT who is personally known to me or who has produced personally known to me or who has produced as identification and who acknowledged the foregoing instrument.

WITNESS my hand and official seal in the County and State last aforesaid this 28th day of March, 2001.

Signature of Notary Public

Jerome R. Schrichter
Printed name of Notary Public

My commission expires:



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CERTIFICATE DESIGNATING PLACE OF BUSINESS
OR DOMICILE FOR THE SERVICE OF PROCESS
WITHIN THIS STATE, NAMING AGENT UPON WHOM
PROCESSED MAY BE SERVED

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted in compliance with said Act:

ADVANCED ALTERNATIVE MEDICINE, INC.

desiring to organize under the laws of the State of Florida, with its principle offices, as indicated in the Articles of Incorporation at FORT LAUDERDALE, BROWARD County, State of Florida, has named LYNDA M. CROCKETT, 1501 South Andrews Avenue, Fort Lauderdale, Florida 33316, agent to accept services of process within this state.

Having been named to accept services of process for the abovestated corporation, at place designated in this Certification. I hereby accept to act in this capacity and agree to comply with the provisions of said Act relative to keeping open said office.

> LYMDA M. CROCKETT Redistered Agent

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> > SECRETARY OF STATE
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