

P01000057561

TRANSMITTAL LETTER

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

FILED
01 JUN -6 AM 11:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: VITALITY MEDICAL RESEARCH CENTERS, INC.
(Proposed corporate name - must include suffix)

000004367310--2
-06/06/01--01040--002
*****70.00 *****70.00

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

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM:

GILBERT ROSENBRIER

Name (printed or typed)

1540 N. POWERLINE RD - 1ST FLOOR

Address

POMPANO BEACH, FL 33069

City, State & Zip

954. 461. 3104

Daytime Telephone number

F. CHESLER

JUN 11 2001

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

ARTICLES OF INCORPORATION

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TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be:

VITALITY MEDICAL RESEARCH CENTERS, INC.

ARTICLE II PRINCIPAL OFFICE

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

1540 N. POWERLINE RD - 1ST FLOOR
POMPANO BEACH, FL 33069

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GILBERT ROSENBRIER
1540 N. POWERLINE RD
1ST FLOOR
POMPANO BEACH, FL 33069

ARTICLE V INCORPORATOR(S)

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

GILBERT ROSENBRIER
1540 N. POWERLINE RD
1ST FLOOR
POMPANO BEACH, FL 33069

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

4th day of June, 2001
~~18~~

X [Signature]
Signature

Signature

Signature

Articles of Incorporation
Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: VITALITY MEDICAL RESEARCH CENTERS, INC

2. The name and address of the registered agent and office is:

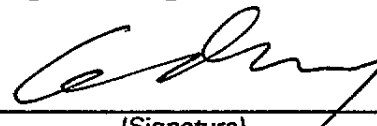
GILBERT ROSEN BRIER
(Name)

1540 N. POWERHNE RD, 1ST FLOOR
(P.O. Box or Mail Drop Box **NOT** acceptable)

POMPANO BEACH, FL 33069
(City/State/Zip)

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TALLAHASSEE, FLORIDA

Having been named as registered agent 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.

X 
(Signature)

June 4, 2001
(Date)