

PD10000087606
TRANSMITTAL LETTER

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

900004562659--6
-08/29/01--01092--003
*****87.50 *****87.50

SUBJECT: 4R PAIN REHABILITATION & HEALTH CLINIC, INC.,
(Proposed corporate name - must include suffix)

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

____ \$87.50
Filing Fee,
Certified Copy
& Certificate of Status
**ADDITIONAL COPY
REQUIRED**

FROM: 4R PAIN REHABILITATION & HEALTH CLINIC, INC.,

Phone (561)

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

FILED
01 SEP - 6 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

G. BULLOCK SEP 06 2001

10302
4



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

August 30, 2001

RIGAUD ST. FORT
4657 FRANWOOD DR
DELRAY BEACH, FL 33445

SUBJECT: 4 R PAIN REHABILITATION & HEALTH CLINIC, INC.
Ref. Number: W01000020302

We have received your document for 4 R PAIN REHABILITATION & HEALTH CLINIC, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures not typed.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Tracy Smith
Document Specialist
New Filing Section

Letter Number: 201A00049487

ARTICLES OF INCORPORATION

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

FILED
01 SEP -6 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

4 R PAIN REHABILITATION & HEALTH CLINIC, INC.,

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:
2100 Lake Ida Road Suite 2A

Delray Beach, FL 33445

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The rendering of Chiropractic, Acupuncture and Medical care, services and treatment.

ARTICLE IV SHARES

The number of shares of stock is ONE THOUSAND (1000)

ARTICLE V INITIAL OFFICERS/ DIRECTORS

RIGAUD ST. FORT - PRESIDENT

YOLAINE LOUIS J. ST. FORT - VICE PRESIDENT

ARTICLE VI REGISTERED AGENT

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

RIGAUD ST. FORT

4657 Franwood Dr.

Delray Beach, FL 33445

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

RIGAUD ST. FORT

4657 Franwood Dr.

Delray Beach, FL 33445

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.

Rigaud St. Fort

Registered Agent

8/27/2001

Date

Rigaud St. Fort

Incorporator

8/27/2001

Date