POODO BISCAYNE BOLLEVARD SLUTE FOR

11900 BISCAYNE BOULEVARD, SUITE 507 NORTH MIAMI, FLORIDA 33181

TELEPHONE (305) 893-8931

TELEFAX (305) 895-8333

October 26, 2001

Via Federal Express

Department of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399 500004656415--4 -10/29/01--01032--019 ******78.75 *****78.75

RE: Aventura Wellness & Rehab Center

Dear Sir/Madam:

With reference to the above, I am herewith enclosing the original and one copy of the Articles of Incorporation regarding Aventura Wellness and Rehab Center along with my check in the sum of \$78.75 representing applicable filing and certified copy fees. Please process this corporation as expeditiously as possible and return the certified copy of the same to the undersigned in the envelope enclosed for your convenience.

Please do not hesitate to contact my office if you have any questions or if there will be any difficulty in this matter.

Very truly yours,

DEAN M. GETTY

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SECRETAL OF STATE
ALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

010CT 29 PH 2:31

AVENTURA WELLNESS & REHAB CENTER, INC. ORETARY OF STATE

The undersigned, acting as Incorporator of a corporation under the Florida General Corporation Act, adopts the following Articles of Incorporation for such corporation:

1. <u>Name.</u> The name of this corporation is

AVENTURA WELLNESS & REHAB CENTER, INC.

- 2. <u>Duration</u>. This corporation shall commence its existence on the date of execution and acknowledgement of these Articles of Incorporation, and shall have perpetual existence unless sooner dissolved according to law.
- 3. <u>Purpose</u>. The purpose of this corporation is to engage in any activities or business permitted under the laws of the United States and the State of Florida, and specifically the practice of chiropractic medicine.
- 4. <u>Capital Stock</u>. The corporation is authorized to issue One Thousand (1000) shares of non par value common stock, which shall be designated as "Common Shares".
- 5. <u>Initial Registered Office and Agent</u>. The name and address of the initial registered agent and office of this corporation is as follows:

Registered Agent

Principal Office and Mailing Address

DEAN M. GETTIS

11900 Biscayne Blvd., #507 North Miami, FL 33181

6. <u>Initial Board of Directors:</u> This corporation shall have

one (3) directors, initially. The number of directors may be either increased or decreased from time to time by amendment of the By-Laws of the corporation in the manner provided by law, but shall never be less than one.

The names and addresses of the initial directors of this corporation are:

Name

<u>Address</u>

ANDREW SCHMER

1991 W. 60 Street
Hialeah, FL 33012-7504

ALEX PLATON

1991 W. 60 Street
Hialeah, FL 33012-7504

ALEX GREAUX

1991 W. 60 Street
Hialeah, FL 33012-7504

- 7. <u>Principal Office and Mailing Address</u>. The principal office and mailing address of the corporation is c/o Dean M. Gettis, Esquire, 11900 Biscayne Blvd., #507, North Miami, FL 33181.
- 8. <u>Incorporator</u>. The name and address of the Incorporator signing these Articles of Incorporation is:

<u>Name</u>

Address

Dean M. Gettis, Esquire 11900 Biscayne Blvd., #507 North Miami, FL 33181

9. Amendment of Articles. This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation or any amendment hereto, and any right conferred

upon the shareholder is subject to this reservation.

10. <u>Indemnification</u>. The corporation may be empowered to indemnify any officer or director, or any former officer or director in the manner set out and provided for in the By-Laws of this corporation and/or the Florida Statutes.

IN WITNESS WHEREOF, the undersigned Incorporator has executed these Articles of Incorporation this day of October, 2001.

Incorporator

STATE OF FLORIDA

) ss:

COUNTY OF MIAMI-DADE

BEFORE ME, the undersigned authority, this day personally appeared DEAN M. GETTIS, to me known to be the person who executed the foregoing Articles of Incorporation, and he acknowledged to and before me that he executed such instrument.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this the 25 day of October, 2001.

My Commission Expires:

NOTARY PUBLIC, STATE OF FLORIDA

OFFICIAE NOTARY SEAL CAROLYN K STARKWEATHER NOTARY PUBLIC STATE OF FLORIDA COMMESSION NO. CC744/25 MY COMMESSION EXP. MAY 30,2002

ACCEPTANCE OF REGISTERED AGENT

I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation.

Registered Agent