

Florida Department of State

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To:

Division of Corporations

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Account Name

: EMPIRE CORPORATE KIT COMPANY

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Phone

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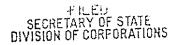
FLORIDA PROFIT CORPORATION OR P.A.

all care chiropractic center, inc.

Certificate of Status	0
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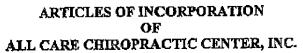
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THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, HEREBY ADOPT(S) THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE I NAME

ALL CARE CHIROPRACTIC CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS COPORATION SHALL BE:

1035 NE 125TH STREET, SUITE 201 NORTH MIAMI, FLORIDA 33161

ARTICLE HI CAPITAL STOCK

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS ONE THOUSAND (1,000) SHARES HAVING A PAR VALUE OF ONE DOLLAR (1.00) PER SHARE.

ARTICLE IV INITIAL BOARD OF DIRECTORS

THE NUMBER OF DIRECTORS CONSTITUTING THE INITIAL BOARD OF DIRECTORS OF THIS CORPORATION IS ONE (1). THE NUMBER OF DIRECTORS MAY EITHER BE INCREASED OR DECREASED FROM TIME TO TIME BY AN AMENDMENT OF THE BY-LAWS BUT SHALL NEVER BE LESS THAN ONE (1). THE NAMES AND ADDRESSES OF THE INITIAL BOARD OF DIRECTORS ARE:

DAVID JAMES KIDD 1035 NE 125TH STREET, SUITE 201, NORTH MIAMI, FLORIDA 33161

ARTICLE V INCORPORATOR

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION IS:

RONALD I. WALTERS 10100 W SAMPLE ROAD, SUITE 322, CORAL SPRINGS, FLORIDA 33065

These Articles of Incorporation Prepared by: R.J. Walters & Company, P.A. 10100 W Sample Road Suite 322, Coral Springs, Florida 33065 (954) 425-8588.

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SECRETARY OF STATE DIVISION OF CORPORATIONS

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ARTICLE VI INITIAL REGISTERED AGENT AND ADDRESS

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS:

RONALD J. WALTERS 10100 W SAMPLE ROAD, SUITE 322, CORAL SPRINGS, FLORIDA 33065

THE UNDERSIGNED HAS EXECUTED THESE ARTICLES OF INCORPORATION THIS DATE:

JANUARY 10, 2002

RONALD J. WALTERS, INCORPORATOR

CERTIFICATE OF DESIGNATION 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 OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. THE NAME OF THE CORPORATION IS ALL CARE CHIROPRACTIC CENTER, INC.

2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

RONALD J. WALTERS 10100 W SAMPLE ROAD, SUITE 322, CORAL SPRINGS, FLORIDA 33065

SIGNATURE

TITLE:

INCORPORATOR

DATE: JANUARY 10, 2002

HAVING BEEN NAMED 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 STATEUTES 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.

REGISTERED AGENT

DATE: JANUARY 10, 2002

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