Florida Department of State

Division of Corporations

Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)205-0381

Account Name ; EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Phone : (305)634-3694 Fax Number : (305)633-9696

FLORIDA PROFIT CORPORATION OR P.A.

BROWARD & DIZZINESS CENTER INC.

Certificate of Status	Ô
Certified Copy	1
Page Count	05
Estimated Charge	\$78,75

ARTICLES OF INCORPORATION

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ARTICLE I - NAMÉ

The name of this corporation is BROWARD BALANCE & DIZZINESS CENTER INC. The principal address and the mailing address of the corporation is 8184 WILES ROAD, CORAL SPRINGS, FL. 33067.

SECRETARY OF STATE ON SECRETARY OF CORPORATIONS

ARTICLE II - DURATION

This corporation shall have perpetual existence commencing on the date of the filing of these Articles with the Department of State.

ARTICLE III - PURPOSE

This corporation is organized for the purpose of transacting any or all lawful business.

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue 100 shares of \$1.00 par value common stock which shall be designated "Common Shares".

ARTICLE V - PRE-EMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation shall have the right to purchase his prorata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 8184 WILES ROAD, CORAL SPRINGS, FL. 33067. The name of the initial registered agent of this corporation at that address is DEBRA LASTOFSKY. The registered office of this corporation is the same as the street address.

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have I Director(s) constituting the initial Board of Directors. The number of Directors may be either increased or decreased from time to time by the ByLaws. The name(s) and address(es) of the initial Board of Directors of this corporation is (are):

DEBRA LASTOFSKY

10037 LEXINGTON ESTATES BLVD BOCA RATON, FL. 33428

The name and address of each person signing these Articles is:

DEBRA LASTOFSKY

10037 LEXINGTON ESTATES BLVD BOCA RATON, FL. 33428

ARTICLE IX - INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE X - AMENDMENT

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this day of

STATE OF FLORIDA COUNTY OF BROWARD

Before me, a Notary Public authorized to take acknowledgments in State and County set forth above, personally appeared the who is known to be and known by me to be the persons who executed the foregoing Articles of Incorporation, and they acknowledged before me that they executed those Articles of Incorporation expressed on ______ 2001.

WITNESS WHEREOF, I have hereunto set my hand affixed my official seal in the State and County aforesaid, this day of , 20 .

Notary Public, State of Florida at Large

My commission expires

W noono022313

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

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUES, THE FOLLOWING IS SUBMITTED:

BROWARD BALANCE & DIZZINESS CENTER INC.

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT THE CITY OF CORAL SPRINGS STATE OF FLORIDA, HAS NAMED DEBRA LASTOFSKY LOCATED AT 8184 WILES ROAD AS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN THE STATE OF FLORIDA.

TITLE: PRESIDENT

DATE: 1/13/02

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUES RELATIVE TO THE PROPER PERFORMANCE OF MY DUTIES.

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