

P02000018838

December 21, 2001

Patrick W. Robson
205 - 150th Avenue
Madeira Beach, Florida 33708

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

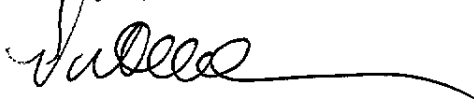
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*****70.00 *****70.00

Dear Division of Corporations

Enclosed please find Articles of Incorporation for Barrier Island Chiropractic along with a check in the amount of \$70.00 for filing fee and designation of registered agent.

Also enclosed is a photocopy of the Articles. Please return this to me with the filing date stamped on it.

Thank you,



Patrick W. Robson

02 JAN 18 PM 3:12
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

W02-2259

02-19-02 ✓
3



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

January 28, 2002

PATRICK W. ROBSON
14953 GULF BLVD
MADEIRA BEACH, FL 33708

SUBJECT: BARRIER ISLAND CHIROPRACTIC
Ref. Number: W02000002259

We have received your document for BARRIER ISLAND CHIROPRACTIC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The effective date is not acceptable since it is not within five working days of the date of receipt.

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) 245-6928.

Tim Burch
Document Specialist
New Filing Section

Letter Number: 602A00004609

ARTICLES OF INCORPORATION
OF
BARRIER ISLAND CHIROPRACTIC, INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida General Corporation act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: Barrier Island Chiropractic, Inc.

The principal place of business of this corporation shall be:

14953 Gulf Boulevard
Madeira Beach, Florida 33708

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory, or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 100

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually. effective January 11, 2002

ARTICLE V OFFICERS DIRECTORS

The names and street addresses of the initial officers and directors, if any, who shall hold office the first year of the corporation's existence or until a successor is elected, is:

Dr. Steven C. Wilson
14953 Gulf Boulevard
Madeira Beach, Florida 33708

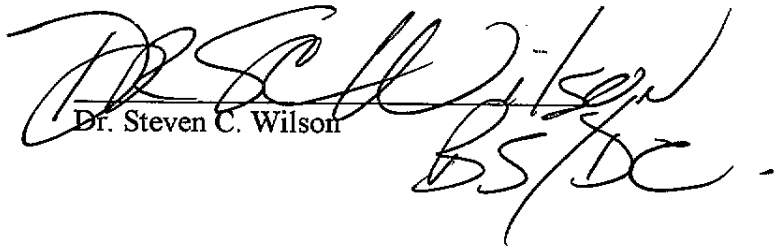
ARTICLE VI INCORPORATOR (S)

The name and street address of the incorporator to these Articles of Incorporation is:

Dr. Steve C. Wilson
14953 Gulf Boulevard
Madeira Beach, Florida 33708

WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 13 day of Feb, 2008.

Signature of Incorporator


Dr. Steven C. Wilson
BS/DC

ARTICLES OF INCORPORATION FILING FEE: \$35.00

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02 JAN 18 PM 3:12

CERTIFICATE DESIGNATING
REGISTERED AGENT/REGISTERED OFFICE

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Pursuant to the provisions of Section 607.325, 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: Barrier Island Chiropractic, Inc.
2. The name and address of the registered agent and office is:

Dr. Steven C. Wilson
14953 Gulf Boulevard
Madeira Beach, Florida 33708

SIGNATURE

Dr. Steven C. Wilson

TITLE

DATE

[Handwritten Signature]
Chiropractic Physician
2/13/02

HAVING BEEN NAMED TO ACCEPT SERVICES 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 STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE

DATE

[Handwritten Signature]
2/13/02

REGISTERED AGENT FILING FEE: \$35.00