

TRANSMITTAL LETTER

P02000056561

FILED  
02 MAY 20 PM 4:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

700005574377--0  
-05/20/02--01050--003  
\*\*\*\*\*50 \*\*\*\*\*78.75  
78.75

SUBJECT: JSK Health 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: Jonathan Kanfer  
Name (Printed or typed)

4363-C Willow Pond Road  
Address

West Palm Beach FL 33417  
City, State & Zip

561-762-7672  
Daytime Telephone number

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

Jonathan Kanfer GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT Art I  
DATE 5/21/02  
DOC. EXAM Walter Brown

DB 5/21 ✓

# ARTICLES OF INCORPORATION

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

## ARTICLE I NAME

The name of the corporation shall be:

JSK Health, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4363-C Willow Pond Road  
West Palm Beach, FL 33417

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medical savings plan

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Jonathan Kanfer, PST  
4363-C Willow Pond Road  
West Palm Beach, FL 33417

## ARTICLE VI REGISTERED AGENT

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

Jonathan Kanfer  
4363-C Willow Pond Road  
West Palm Beach, FL 33417

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jonathan Kanfer  
4363-C Willow Pond Road  
West Palm Beach, FL 33417

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Jonathan S Kanfer  
Signature/Registered Agent

Jonathan S Kanfer  
Signature/Incorporator

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Date

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