LAW OFFICES

OF

GUSTAVO G. ALARCON, P.A.

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ALARCONG@AOL.COM June 24, 1002 8 000006 15 -07/02/02-

Secretary of State Corporate Record Bureau Division of Corporations Department of State P.O. Box 6327 Tallahassee, Florida 32301

RE:

Azito Chiropractic, Inc.

Dear Sir/Madam:

Enclosed please find original and two (2) copies of the Articles of Incorporation for Azito Chiropractic, Inc., along with a check in the amount of One Hundred Twenty-Two Dollars and Fifty Cents (\$122.50) to cover filing fees. We are also attaching a self-addressed stamped envelope and request that after filing, the Certificate and copies be returned to us.

Thank you for your cooperation in this matter.

Very truly yours,

Gustavo G. Alarcon, Esq.

GGA/cjk

Enclosures

7 SMITH JUL 0 3 2002

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ARTICLES OF INCORPORATION OF AZITO CHIROPRACTIC, INC.

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

ARTICLE I

The name of the corporation shall be AZITO CHIROPRACTIC, INC.

ARTICLE II

The corporation shall have perpetual existence.

ARTICLE III

The general purpose for which the corporation is organized is:

- 1. To provide chiropractic services.
- 2. To transact any other lawful business for which corporations may be incorporated under the Florida General Corporation Act, or engage into any other trade or business which can, in the opinion or the shareholders of the Corporation, be advantageously carried on in connection with and auxiliary to the foregoing business.
- 3. To do such other things as are incidental to the foregoing or necessary or desirable in order to accomplish the foregoing

ARTICLE IV

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 at one dollar par. Such shares shall be of single class and shall have a par value of ONE DOLLAR (1.00) per share.

ARTICLE V

The principal place of business and mailing address of this corporation shall be:
2121 North Bayshore Drive
Apt. 712
Miami, Florida 33137

ARTICLE VI

The initial number of Shareholders of the Corporation is one.

DIVISION OF CORPORATION: 20

The name and address of said shareholder is:

Arturo Azito 2121 North Bayshore Drive Apt. 712 Miami, Florida 33137

ARTICLE VII

The name and address of the incorporator is:

Arturo Azito 2121 North Bayshore Drive Apt. 712 Miami, Florida 33137

ARTICLE VIII

The business of this corporation shall be managed by its shareholder rather than by a Board of Directors.

ARTICLE IX

These Articles of Incorporation shall be effective immediately upon the receipt and approval of the Secretary of State of Florida

ARTICLE X

These Articles of Incorporation may be amended in the manner provided by law.

The undersigned incorporator has executed these Articles of Incorporation this 24 day of, June 2002.

ADTITO AZITO

STATE OF FLORIDA

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COUNTY OF BROWARD

Before me personally appeared Arturo Azito to me well known and known to me to be the person described in and who executed the foregoing Articles of Incorporation and acknowledge to and before me that he executed said instrument for the purpose therein expressed

WITNESS my hand and official seal this 24 day of June, 2002

Notary Public, State of Florida at Large

Commission expires:

GELOGUSTAVO ALARCON

NOTARY S My Comm Exp. 4/13/2003

No. CC 826480

[Meaning Known [] Object 12

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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.

- The name of the corporation is AZITO CHIROPRACTIC, INC. 1.
- 2. The name and address of the registered agent and office is:

ARTURO AZITO 2121 North Bayshore Drive Apt. 712 Miami, Florida 33137

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE-STYLED 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 STATUTES 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.

DATE: 6/24/02