## P02000115784

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

800008444668--3 -10/18/02--01036--012 \*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT:Cir	cle of Healing P.A.				
<del></del>	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
		-			
Enclosed are an original	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:	í	
□ \$70.00	<b>2</b> \$78.75	\$78.75	<b>3</b> \$87.50	ĺ	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	İ	
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of		
			Status ·	[	
		ADDITIONAL CO	DPY REQUIRED	i	
FROM:	Regina Hancock Accoun	ting Service			
	Nam	e (Printed or typed)			
	50 West Central Ave.	<u> </u>	<u> </u>	02	
		Address		02 OCT 28	
		- -		_ <u>\                                   </u>	3 3
	Lake Wales, FI 33853				1.1.J
	City	y, State & Zip		AH 8:	
	863-678-9397	<u> </u>	2.3	8: 58	
•		Telephone number	Şm	σ.	
		•		بعمر	
			11-3	010	10

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

Am 10/29



## FLORIDA DEPARTMENT OF STATE

Jim Smith Secretary of State

October 21, 2002

REGINA HANCOCK ACCOUNTING SERVICE 50 WEST CENTRAL AVE LAKE WALES, FL 33853

SUBJECT: CIRCLE OF HEALING P.A.

Ref. Number: W02000030190

We have received your document for CIRCLE OF HEALING P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated in your document is not an active entity according to our records. Please reinstate this entity (call (850) 245-6059 for information) or designate another entity that is active according to our records.

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) 245-6931.

Becky McKnight Document Specialist New Filing Section

Letter Number: 202A00058131

ARTICLES OF INCORPORATION	<del>-</del>	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	_	
ARTICLE I NAME		
The name of the corporation shall be:		
Circle of Healing P.A.		
On the China of th		
ARTICLE II PRINCIPAL OFFICE		
The principal place of business/mailing address is:		
2800 Thunderbird Rd Sebring, Fi 33872	<u>.</u>	
ARTICLE III PURPOSE	=	·
The purpose for which the corporation is organized is:	=	
to provide professional services to the public under the leg other function required to assist clients in Oriental Medicin		acupuncturist and
ARTICLE IV SHARES		
The number of shares of stock is:		
1000 Shares of Common Stockl		
ARTICLE V INITIAL OFFICERS/DIRECTORS (opti	onal)	
The name(s), address(es) and title(s):		
Shelley MCKenzie, President/Vice President/Secretary/Tr	eāsure/ Board o	of Directors
2800 Thunderbird Rd. Sebring, FI 33872		
Gebring, 11 33012	<u> </u>	
ARTICLE VI REGISTERED AGENT	err <del>allia</del> .	
The <u>name and Florida street address</u> of the registered agent is:	<del>-</del>	Transp None
Regina Hancock		2 <b>2</b>
50 West Central Ave.	-	:
Lake Wales, FI 33853	-	28
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:		E-1020000-
-	<del></del> ;	
Regina Hancock 50 West Central Ave.		8: 5
Lake Wales, FI 33853	-	0.7 0.7 0.7
***************	*****	*********
Having been named as registered agent to accept service of process for the ac	bove stated corporati	ion at the place designated in thi
certificate, I am familiar with and accept the appointment as registered agent	and agree to act in ti	ніѕ сарасну
Koning V. I ancook		10/7/02
Signature/Registered Agent	<u>-</u>	Date
Nearna Hancock	<u> </u>	10/07/02
Signature/Incorporator	<u>-</u>	Date
J	= der	