

P03000003851

Florida Department of State
Division of Corporations
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FLORIDA PROFIT CORPORATION OR P.A.

First Care Center P.A.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

First Care Center P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

**First Care Center P.A.
8006 Beaty Grove Drive
Tampa, FL 33626**

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,500 SHARES @ No Par Value

ARTICLE IV PURPOSE

The purpose for which this corporation is/are formed, are as follows:

To practice the profession of a(n): **Chiropractic/Medical**

Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-8940

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ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Samuel Evenstein
8006 Beaty Grove Drive
Tampa, FL 33626**

ARTICLES VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

**Samuel Evenstein
71 Ackerman Avenue, #196
Clifton, NJ 07011**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

9th day of January 2003.



**Samuel Evenstein
SIGNATURE**

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: First Care Center P.A.

2. The name and address of the registered agent and office is:

Samuel Evenstein

Name

8006 Beaty Grove Drive

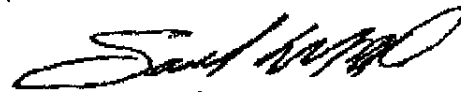
(P.O. Box or Mail Drop Box NOT Acceptable)

Tampa, FL 33626

(City / State / Zip)

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Having been named as registered agent and to accept service of process for the above stated 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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.



Samuel Evenstein
SIGNATURE

January 9, 2003

(Date)