

PO3000045838

_____ (Requestor's Name) _____

_____ (Address) _____

_____ (Address) _____

_____ (City/State/Zip/Phone #) _____

PICK-UP WAIT MAIL

04/24/03 - 01055 - 002 **78.75

_____ (Business Entity Name) _____

_____ (Document Number) _____

Certified Copies _____ Certificates of Status _____

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RECEIVED
03 APR 24 AM 10:30
DIVISION OF CORPORATION

FILED
03 APR 24 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Charter Number Only

April 22, 2003

Impact Images

Requestor's Name

2895 Griffin Road #2

Address

Ft. Lauderdale, FL 33312

City

State

ZIP

Phone

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CORPORATION(S) NAME

Team BodyLogic, Inc.

 Empire Toll Free: 1-800-432-3028

<input checked="" type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> NonProfit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution	<input type="checkbox"/> Mark
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input type="checkbox"/> Reinstatement	<input type="checkbox"/> Reservation	<input type="checkbox"/> Change of Registered Agent
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Photo Copies	<input type="checkbox"/> Certificate Under Seal
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input type="checkbox"/> Pick Up
		<input type="checkbox"/> Mail Out

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

CERTIFIED COPY

ARTICLES OF INCORPORATION
OF

TEAM BODYLOGIC, INC.

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:

Team Bodylogic, Inc.

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TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

845 Garnet Circle
Weston, FL 33326

ARTICLE III CAPITAL STOCK

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

100 shares @ \$1 par value

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Francis R. Garn
845 Garnet Circle
Weston, FL 33326

ARTICLE V INCORPORATOR(S)

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

Francis R. Garn
845 Garnet Circle
Weston, FL 33326

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

22 day of April, 2003.

Robert Garn, President
Signature/Title

Signature/Title

Signature/Title

CERTIFICATE OF DESIGNATION
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 designating the registered office/registered agent, in the state of Florida.

Team Bodylogic, Inc.

1. The name of the corporation is: _____

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

Francis R. Garn

(NAME)

845 Garnet Circle

(P.O. BOX ~~NOT ACCEPTABLE~~)

Weston, FL 33326

(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA
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SIGNATURE F. Robert Garn
(corporate officer)
TITLE President
DATE 4/22/03

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 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.

SIGNATURE F. Robert Garn
DATE 4/22/03

REGISTERED AGENT FILING FEE: \$35.00