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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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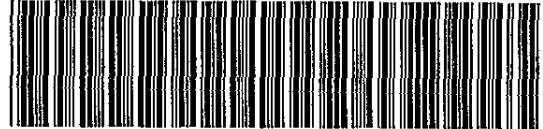
(Business Entity Name)

(Document Number)

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03 MAY 21 AM 9:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

5-30-03  
[Signature]

## TRANSMITTAL LETTER

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

SUBJECT: Charleston Chiropractic Medicine and Rehabilitation, P.A.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00      ☒ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Daniel Charleston, D.C.  
Name (Printed or typed)

9338 SW 3rd Street, # 505

Address

Boca Raton, Florida 33428

City, State & Zip

(561) 596-6791

Daytime Telephone number

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

## 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:

Charleston Chiropractic Medicine and Rehabilitation, P.A.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1055 S. Congress Ave, Delray Beach, FL 33444

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To examine, diagnose, and treat, patients with neuromusculoskeletal ailments.

### ARTICLE IV SHARES

The number of shares of stock is:

1

### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Daniel Charleston, D.C. (C.E.O.)  
9338 S.W. 3rd Street, #505  
Boca Raton, FL 33428

### ARTICLE VI REGISTERED AGENT

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

Daniel Charleston, D.C.  
9338 S.W. 3rd Street, #505  
Boca Raton, FL 33428

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Daniel Charleston, D.C.  
9338 S.W. 3rd Street, #505  
Boca Raton, FL 33428

\*\*\*\*\*  
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

Daniel Charleston, D.C.  
Signature/Registered Agent

5/19/03

Date

Daniel Charleston, D.C.  
Signature/Incorporator

5/19/03

Date

FILED

03 MAY 21 AM 9:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA