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(Requestor's Name)

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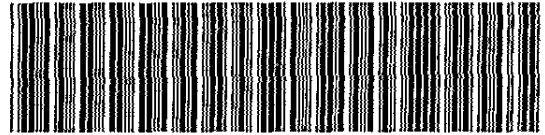
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2003 AUG 12 PM 3:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

08-14-03  
10

## TRANSMITTAL LETTER

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

SUBJECT: New Hope Family Spinal Correction, INC.  
(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  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☒ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Stephen Linderman  
Name (Printed or typed)

5103 Presidential Street  
Address

Seffner FL 33511  
City, State & Zip

(813) 655-9396  
Daytime Telephone number

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Articles of Incorporation**  
**Of**  
**New Hope Family Spinal Correction, INC.**

The undersigned hereby associate for the purpose of becoming a corporation for profit under the laws of the State of Florida in compliance with Section 607.0202, Florida Statutes.

**I.**

The Name of the corporation shall be

**New Hope Family Spinal Correction, INC.**

**II.**

The principal office of the corporation and the mailing business address of the corporation shall be: 5103 Presidential Street, Seffner Florida 33511.

**III.**

The purpose for which the corporation is to be formed and the general nature of the corporation's business shall be: to engage in the business of providing services, as well as to engage in any other activity or business permitted under the laws of the State of Florida.

**IV.**

The amount of the capital stock of the corporation shall be One Thousand (1,000) Share of common stock with a par value of \$1.00 per share.

**V.**

The amount of capital with which the corporation will begin business will be no less than Five Hundred and No/100 (\$500.00) Dollars.

## **VI.**

The entire voting power for the selection of directors and for all purposes shall be vested exclusively in the holders of common stock, who shall be entitled to one vote for each share of common stock held by them of record.

## **VII.**

The names and post office addresses of the members of the first Board of Directors, until the first annual meeting of the stockholders are as follows:

NAME:	ADDRESS:
Robert P. Bourgeois	2215 Towering Oaks Circle Seffner, FL 33584
Bryan R. Bourgeois	2215 Towering Oaks Circle Seffner, FL 33584
Michelle Bourgeois	5103 Presidential Street, Seffner FL, 33511
Tara J. Linderman	641 Lakemont Dr., Brandon FL, 33510
Paula Averill	806 Figtree Ln., Brandon FL, 33511
Danielle Landis	18806 Beritz Ave. Lutz FL, 33509

## **VIII.**

The number of directors is to be not less than one nor more than six and the directors need not be stockholders. Any vacancies created in the Board of Directors shall be filled by special meeting of the stockholders.

## **IX.**

Then names and post office addresses of the officers of the corporation until the first annual meeting of the stockholders are as follows:

NAME:	TITLE:	ADDRESS:
Scott Bourgeois	President, Treasure	5103 Presidential Street, Seffner FL 33511
Stephen Linderman	Vice President, Secretary	641 Lakemont Dr., Brandon FL 33510

## **X.**

Scott Bourgeois and Stephen Linderman, 5103 Presidential Street, Seffner, Florida 33511, as subscribers/incorporators of the Articles of Incorporation, each agree to take 500 shares of common stock.

## **XI.**

The duration of the corporation is to be perpetual.

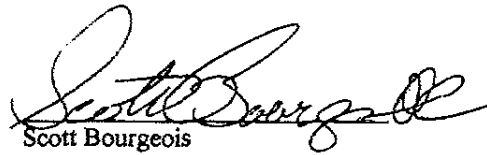
**XII.**

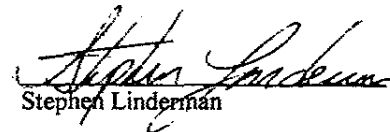
The street address corporation's initial registered office and the name of its initial registered agent at the office are as follows:

Stephen Linderman

5103 Presidential Street, Seffner, Florida 33511

**IN WITNESS WHEREOF**, we have made, signed and acknowledged these Articles of NEW HOPE FAMILY SPINAL CORRECTION, INC., this 24 day of June 2003.

  
Scott Bourgeois

  
Stephen Linderman

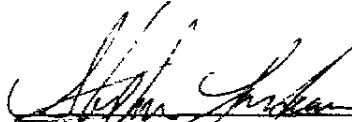
**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF  
PROCESS WITHIN THIS STATE NAMING AGENT UPON WHOM PROCESS MAY BE  
SERVED**

In pursuance of Section 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

First that NEW HOPE FAMILY SPINAL CORRECTION, INC., desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation, County of Hillsborough, State of Florida has named Stephen Linderman, 5103 Presidential Street, County of Hillsborough, State of Florida, as its agent to accept service of process within this state.

**ACKNOWLEDGEMENT OF REGISTERED AGENT AND DUTIES PURSUANT TO SECTION  
607.0505, FLORIDA STATUTES**

Having been named to accept service of process for the above stated corporation, at place designated in this certificate, I hereby accept to act in the capacity, and agree to comply with the provisions of Chapter 607, Florida Statutes relative to accepting service.

  
Stephen Linderman

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**2003 AUG 12 PM 3:52**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**