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# FLORIDA PROFIT CORPORATION OR P.A.

The Body Rx of Naples and Boca Raton, Inc.

Certificate of Status	1
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## 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:

## The Body Rx of Naples and Boca Raton, Inc.

ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:

The Body Rx of Naples and Boca Raton, Inc.

4501 North Ocean Blvd. TH1 Boca Raton, FL 33431



#### 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 at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

> David Poces 4501 North Ocean Blvd. TH1 Boca Raton, FL 33431

Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-516-935-3940

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#### ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

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

David Poces - President 4501 North Ocean Blvd. TH1 Boen Raton, FL 33431

## ARTICLES VI INCORPORATOR(S) The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

David Poces 4501 North Ocean Blvd. TH1 Boca Raton, FL 33431

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

30th day of September 2003.

**David Poces - Signature** 

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## 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: The Body Rx of Naples and Boca Raton, Inc.

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

#### **David Poces**

Name

4501 North Ocean Blvd. TH1

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

Boca Raton, FL 33431

(City / State / Zip)

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.

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David Poces SIGNATURE

September 30, 2003

(Date)

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