

P040000655/4

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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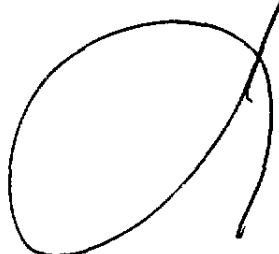
(Business Entity Name)

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VALIDATION ONLY

Requestor's Name

Address

City

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Phone

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CORPORATION(S) NAME

NU Look Rehab Inc.

- | | | |
|--|--|---|
| ☒ Profit | ☐ Amendment | ☐ Merger |
| ☐ NonProfit | | |
| ☐ Foreign | ☐ Dissolution | ☐ Mark |
| ☐ Limited Partnership | ☐ Annual Report | ☐ Other |
| ☐ Reinstatement | ☐ Reservation | ☐ Change of Registered Agent |
| ☒ Certified Copy | ☐ Photo Copies | ☐ Certificate Under Seal |
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Empire Toll Free: 1-800-432-3028

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: **NU LOOK Rehab Inc.**

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

**1035 N.E. 125th ST
Suite 201
N. Miami, FL 33161**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**provide chiropractic AND
rehabilitative care.**

ARTICLE IV SHARES

The number of shares of stock is:

20

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

**DAVID J. Kidd - President
3650 INVERRARY DR. APT. 1Y
LAUDERHILL, FL. 33319-**

ARTICLE VI REGISTERED AGENT

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

**DAVID J. Kidd
3650 INVERRARY DR. APT 1Y
LAUDERHILL, FL 33319**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**DAVID J. Kidd
3650 INVERRARY DR. APT 1Y
LAUDERHILL, FL 33319**

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

X David J. Kidd
Signature/Registered Agent

X David J. Kidd
Signature/Incorporator

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