

**P04000167515**

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 205-0381

From:

Account Name : KRAMER, GREEN, ZUCKERMAN & KAHN, P.A.  
Account Number : 073707002173  
Phone : (954) 966-2112  
Fax Number : (954) 981-1605

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04 DEC 14 AM 8:53  
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TALLAHASSEE, FLORIDA

**FLORIDA PROFIT CORPORATION OR P.A.**

**CENTRAL FLORIDA INJURY & WELLNESS CENTER, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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12-15

**ARTICLES OF INCORPORATION**  
**OF**  
**CENTRAL FLORIDA INJURY & WELLNESS CENTER, INC.**

I, the undersigned, for the purpose of forming a corporation for profit, pursuant to the laws of the State of Florida, do hereby adopt the following Articles of Incorporation:

ARTICLE I

NAME

The name of this corporation is Central Florida Injury & Wellness Center, Inc.

ARTICLE II

MAILING ADDRESS

The mailing address of this corporation is 1005 Lascala Drive, Windermere, Florida 34786.

ARTICLE III

DURATION

This corporation shall have perpetual existence commencing on the date of filing of the Articles of Incorporation with the Department of State.

ARTICLE IV

PURPOSE

This corporation is organized for the purpose of transacting any or all lawful business.

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ARTICLE V

CAPITAL STOCK

This corporation is authorized to issue seven thousand five hundred (7,500) shares of One (\$1.00) Dollar par value common stock, which shall be designated "Common Shares."

ARTICLE VI

VOTING RIGHT

Each share of common stock of this corporation shall entitle the holder of record thereof to one (1) vote upon each proposal presented at lawful meetings of the stockholders.

ARTICLE VII

PREEMPTIVE RIGHTS

There shall be no preemptive rights in any stock herein issued or hereafter issued.

ARTICLE VIII

INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The street address of the initial registered office of this corporation is 4000 Hollywood Boulevard, Suite 485 South, Hollywood, Florida 33021, and the name of the initial registered agent of this corporation at that address is Mitchell F. Green.

ARTICLE IX

INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director initially. The number of directors may be either increased or diminished from time to time by the bylaws, but never less than one (1).

The name and address of the initial director of this corporation is:

Michael Sofer  
1005 Lascala Drive  
Windermere, FL 34786

Dec.14. 2004 4:19PM

No.5107 P. 4  
(((H04000246603 3)))

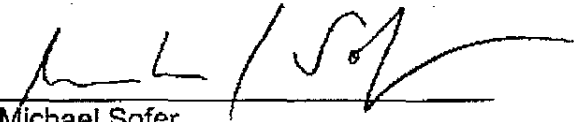
ARTICLE X

INCORPORATOR

The name and address of the Incorporator is:

Michael Sofer  
1005 Lascala Drive  
Windermere, FL 34786

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation  
on this 10<sup>th</sup> day of December, 2004.

  
\_\_\_\_\_  
Michael Sofer  
Initial Director/Incorporator

Dec.14. 2004 4:19PM

No.5107 P. 5  
(((H04000246603 3)))

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

In compliance with Sections 48.091 and 607.0501, Florida Statutes, the following is  
submitted:

FIRST -- That Central Florida Injury & Wellness Center, Inc., desiring to organize or  
qualify under the laws of the State of Florida, with its principal place of business at 1005  
Lascala Drive, City of Windermere, State of Florida, has named Mitchell F. Green, located at  
4000 Hollywood Boulevard, Suite 485 South, City of Hollywood, State of Florida, as its agent  
to accept service of process within the State of Florida.

SIGNATURE: \_\_\_\_\_

Michael Sofer

TITLE: Incorporator

DATE: 12-10-04

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TALLAHASSEE, FLORIDA

Having been named to accept service of process for the above-stated corporation, at  
the place designated in this Certificate, I hereby agree to act in this capacity, and I further  
agree to comply with the provisions of all statutes relative to the proper and complete  
performance of my duties.

SIGNATURE: \_\_\_\_\_

Mitchell F. Green  
Registered Agent

DATE: 12-14-04