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#### ARTICLES OF INCORPORATION

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# 7TH AVENUE CHIROPRACTIC II INC

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

#### ARTICLE I

The name of the Corporation is:

# 7TH AVENUE CHIROPRACTIC II INC

#### ARTICLE II

The purpose for which the Corporation is organized is to engage in any activities or business permitted under the laws of the United States and Florida.

### ARTICLE III

The aggregate number of shares that the Corporation shall have the authority to issue is SEVEN THOUSAND (7,000) shares of Capital Stock, all of one class, with a par value of One Dollar (\$1.00) per share.

# ARTICLE IV

The period of duration of the Corporation is perpetual.

#### ARTICLE V

The amount of capital with which the Corporation shall begin business is not less that SIX HUNDRED DOLLARS (\$600.00).

# ARTICLE VI

The address of the initial Principal Office of the Corporation is: 1150 N.W. 72nd Avenue, Suite 555, Miami, Fl. 33126

#### ARTICLE VII

The number of directors constituting the initial Board of Directors of the Corporation are:

SUSAN EXPOSITO

1150 N.W. 72nd Ave. Suite 555 Miami, Florida, 33126

# ARTICLE VIII

The name and address of the initial subscriber and Registered Agent of the corporation is:

SUSAN EXPOSITO

1150 N.W. 72nd Avenue Suite 555 Miami, Florida, 33126

# ARTICLE IX

The following persons shall be the officers of this Corporation for the first year of its existence or until their successors are elected and have qualified:

SUSAN EXPOSITO

Director, President, Treasurer and Secretary

# ARTICLE X

Shareholders shall not be entitled to preemptive rights.

IN WITNESS WHEREOF, I the undersigned, have made, subscribed and acknowledged this Article of Incoporation, this 1st day of February, 2005.

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 statutes relating to the proper and complete performance of my duties and I am familiar with and accept the obligations of my position as registed agent.

Susan Exposito, Subscriber and Registered Agent.

#### STATE OF FLORIDA

## COUNTY OF MIAMI DADE

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and County aforesaid to take acknowledgements, personally appeared Susan Exposito, subscriber and Registered Agent, to me known to be the person described in or who (have) (has) produced Florida Drivers License as identification and who executed the foregoing document and she acknowledged before me that she executed the same.

**WITNESS** my hand and official seal in the County and State aforesaid this 1st day of February, 2005.

My commission expires:

NOTARY PUBLIC, State of Florida

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