

Florida Department of State
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To:
Division of Corporations
Fax Number : (850) 205-0381

From:
Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (212) 431-5000
Fax Number : (212) 431-1441

FLORIDA PROFIT CORPORATION OR P.A.

Carlisi Chiropractic Center, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

2005 SEP 14 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

2005 SEP 14 PM 12:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLE I NAME**

The name of the corporation shall be:

Carlisi Chiropractic Center, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:


1405 OLD MOODY BLVD.
BUNNELL, FL 32110**ARTICLE III PURPOSE**The purpose for which the corporation is organized is:
GENERAL**ARTICLE IV SHARES**

The number of shares of stock is:

1,000 AT NO PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ROY C. CARLISI, DIRECTOR
23 NORTH VILLAGE DRIVE
PALM COAST, FL 32137**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:ROY C. CARLISI
23 NORTH VILLAGE DRIVE
PALM COAST, FL 32137**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:CANDICE PIGNATARO
C/O BLUMBERGEXCELSIOR
62 WHITE STREET
NEW YORK, NY 10013*****
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

Candice Pignataro
Blumberg Excelsior
62 White Street, Incorporator
New York, NY 10013SEPTEMBER 14, 2005
DateSEPTEMBER 14, 2005
Date
H050002193953