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To:

Division of Corporations Fax Number

: (850)205-0381

From:

: FAS-T CORP. AGENTS, INC. Account Name

Account Number: 071001002335 Phone (305) 599-0839

Fax Number (305)716-0346 5

FLORIDA PROFIT/NON PROFIT CORPORATION

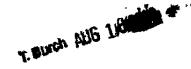
THE CENTER FOR HEALING, INC

Certificate of Status	0
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ARTICLES OF INCORPORATION

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

SECRETARY OF

ARTICLE I NAME

The name of the corporation shall be:

The Center for Healing, Inc.

ARTICLE IL PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2530 Tottenbam Dr. New Port Richey, FL 34655

ARTICLE III NATURE OF BUSINESS

This corporation may engage in every aspect of the business of rendering the same professional services to the Public that a company duly licensed under the laws of the State of Florida, is authorized to render. This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory of the nation.

ARTICLES IV SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

7.500 Shares

ARTICLE V BOARD OF DIRECTORS

The number of directors constituting the initial Board of Directors is one and the names and address of the persons who are to serve as the directors until the first annual meeting of shareholders or until their successors are elected and qualified are:

PRESIDENT AND SECRETARY:

Kathryn A. Olson 2530 Tottenhamn Dr. New Port Richey, FL 34655

VICE PRESIDENT AND TREASURER:

Kathryn A. Olson 2530 Tottenham Dr. New Port Richey, FL 34655

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Kathryn A. Olson 2530 Tottenham Dr. New Port Richey, FL 34655

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 a 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 registered agent.

Signature/Registered Agent

Date

ARTICLE VII INCORPORATOR:

The name and address of the incorporator of these Articles of Incorporation are:

Kathryn A. Olson 2530 Tottenham Dr. New Port Richey, FL 34655

Signature/Incorporator

Date

(An Additional Article must be added if an effective date is requested)