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: EXPRESS CORPORATE FILING SERVICE INC. Account Name

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FLORIDA PROFIT/NON PROFIT CORPORATION

FINLAY CHIROPRACTIC CENTER, INC

Certificate of Status	0
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ARTICLES OF INCORPORATION

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

FINLAY CHIROPRACTIC CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

348 NW 27 AVE MIAMI, FL 33125

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CHIROPRACTIC CENTER

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES AT \$1.00 EACH

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DIANA L FINLEY / 1441 LINCOLN CT APT 408

11 LINCOLN CT APT 409 / PRESIDENT

MIAMI BEACH, FLORIDA 33139

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

DIANA L FINLEY 1441 LINCOLN CT APT 409 MIAMI BEACH, FLORIDA 33139

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DIANA L FINLEY 1441 LINCOLN CT APT 409 MIAMI BEACH, FLORIDA 33139

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 eat in this capacity

Signature/Registered Agent

Signature/Incorporator

Date

Date