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# Florida Department of State

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From:

Account Name : A.A.ALI, CPA Account Number: I20000000192 Phone : (407)298-3900 Fax Number : (407)298-0660

FLORIDA PROFIT/NON PROFIT CORPORATION

BEDFORD NORTH CHIROPRACTIC CENTER, INC

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7/2/2008

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# ARTICLES OF INCORPORATION OF BEDFORD NORTH CHIROPRACTIC CENTER, INC.

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

#### ARTICLE I - CORPORATE NAME AND ADDRESS

The name and address of the corporation is:

NAME: BEDFORD NORTH CHIROPRACTIC CENTER, INC.

PHYSICAL ADDRESS: 2817 BELCO DR STE 6 ORLANDO FL 32808 MAILING ADDRESS: 2817 BELCO DR STE 6 ORLANDO FL 32808

#### ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

## ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

#### ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 1000 shares of (One) Dollar(s) (\$1.00) par value Common Stock, which shall be designated "Common Shares."

#### ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the Initial Registered Agent of this Corporation is:

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Name:	TODD SWEENEY
Address:	3002 8 <sup>TH</sup> AVE N
City:	ST PETERSBURG, FL 33713

#### ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have TWO (2) director(S) initially. The number of directors may be either increased or diminished from time to time by the By-laws, but shall never be less than one (1). The name and address of the initial director(s) of the corporation are as follows:

Name:	TODD SWEENEY, PRESIDENT	
Address:	3002 8 <sup>TH</sup> AVE N	· · · · · · · · · · · · · · · · · · ·
City:	ST PETERSBURG, FL 33713	

## ARTICLE VII - INCORPORATORS

The name and address of the person signing these articles of Incorporation are as follows:

Name:	TODD SWEENEY
Address:	3002 8 <sup>TH</sup> AVE N
City:	ST PETERSBURG, FL 33713

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\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

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

TODD SWEENEY /Registered Agent

07/01/2008

Date

TODD SWEENEY /Incorporator

7/01/2008

Date

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