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Florida Department of State  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 MAY 11 PM 12:41

APPROVED  
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**FLORIDA PROFIT/NON PROFIT CORPORATION**

**PINE HILLS FAMILY CHIROPRACTIC CENTER, INC.**

Certificate of Status	1
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**ARTICLES OF INCORPORATION  
OF  
PINE HILLS FAMILY CHIROPRACTIC CENTER, INC.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 MAY 11 PM 12:42

APPROVED  
AND  
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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: PINE HILLS FAMILY CHIROPRACTIC CENTER, INC.

PHYSICAL ADDRESS: 1247 N PINE HILLS RD ORLANDO, FL 32808

MAILING ADDRESS: 1247 N PINE HILLS RD 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."

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

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

Name: DR C. RICHARD BAME

Address: 1247 N PINE HILLS RD

City: ORLANDO, FL 32808

**ARTICLE VI - INITIAL BOARD OF DIRECTORS**

This corporation shall have ONE (1) 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: DR C. RICHARD BAME, PRESIDENT

Address: 1247 N PINE HILLS RD

City: ORLANDO, FL 32808

**ARTICLE VII - INCORPORATORS**

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

Name: DR C. RICHARD BAME

Address: 1247 N PINE HILLS RD

City: ORLANDO, FL 32808

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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

*C. Richard Bame*

DR C. RICHARD BAME / Registered Agent

05/11/2009

Date

*C. Richard Bame*

DR C. RICHARD BAME / Incorporator

05/11/2009

Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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