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2011 MAY 13 PM 4:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch MAY 16 2011

TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: _____ VITALITY MEDICAL INSTITUTE INC. _____
(Proposed Corporation name – must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM: Miriam R. Goldin, VP
Arnold S Goldin & Associates Inc.
5106D. Lake Catalina
Boca Raton, FL 33496
1-800-873-1900

NOTE; Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: VITALITY MEDICAL INSTITUTE INC.

ARTICLE II PRINCIPAL OFFICE

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

5106D Lake Catalina Dr., Boca Raton, FL 33496

The business mailing address of this corporation shall be:

PO Box 276258, Boca Raton, FL 33427-6158

ARTICLE III SHARES

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

100 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Arnold S. Goldin 5106D Lake Catalina Dr., Boca Raton, FL 33496

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Arnold S. Goldin 5106D Lake Catalina Dr., Boca Raton, FL 33496

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

12th Day of May, 2011.

(Signature)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: VITALITY MEDICAL INSTITUTE INC.
2. The name and address of the registered agent and office is:

Arnold S. Goldin
5106D Lake Catalina Dr.
Boca Raton, FL 33496

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 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)

5/12/11

(Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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TALLAHASSEE, FLORIDA