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## To:

Division of Corporations  
Fax Number : (850) 617-6381

## From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
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FLORIDA PROFIT/NON PROFIT CORPORATION  
TK HEALTH SERVICES, INC.

Certificate of Status	0
Certified Copy	1
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ARTICLES OF INCORPORATION  
OF

**TK HEALTH SERVICES, INC.**

The undersigned hereby forms a Corporation under the following charter of Articles of incorporation:

ARTICLE I

The name of this Corporation shall be:

**TK HEALTH SERVICES, INC.**

ARTICLE II

The principal place of business/mailling address is:

229 30<sup>TH</sup> STREET  
WEST PALM BEACH, FL 33407

ARTICLE III

The specific nature of business to be transacted by the professional association is to engage in the business of receiving sales commission on the sale of real property for profit.

ARTICLE IV

This corporation is authorized to issue one hundred shares of one-dollar (1.00) par common stock.

ARTICLE V

This Corporation shall have two (2) directors 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 names and addresses of the initial directors of this Corporation are:

**TIMOTHY KOZLOWSKI**  
229 30<sup>TH</sup> STREET  
WEST PALM BEACH, FL 33407

**HANNAH HOLDEN**  
229 30<sup>TH</sup> STREET  
WEST PALM BEACH, FL 33407

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ARTICLE VI

The name and address of the initial registered agent of this corporation is:

TIMOTHY KOZLOWSKI  
229 30<sup>TH</sup> STREET  
WEST PALM BEACH, FL 33407

ARTICLE VII

The name and address of the incorporator of this corporation is:

TIMOTHY KOZLOWSKI  
229 30<sup>TH</sup> STREET  
WEST PALM BEACH, FL 33407

ARTICLE VIII

SIGNATURE



TIMOTHY KOZLOWSKI, Incorporator

TITLE: President

DATE: 5/12/2011

**CERTIFICATE OF DESIGNATION**

**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned Corporation, organized under the laws of the state of Florida, submits in the state of Florida.

1. The name of the Corporation is:

**TK HEALTH SERVICES, INC.**

The name and address of the registered agent and office is:

**TIMOTHY KOZLOWSKI  
229 30<sup>TH</sup> STREET  
WEST PALM BEACH, FL 33407**

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: Timothy Kozlowski

TIMOTHY KOZLOWSKI, Registered Agent

DATE: 5/12/2011

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