

**Electronic Articles of Incorporation
For**

P13000093635
FILED
November 18, 2013
Sec. Of State
jbryan

SARKELA CHIROPRACTIC HAND AND FOOT CLINIC, PA

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

SARKELA CHIROPRACTIC HAND AND FOOT CLINIC, PA

Article II

The principal place of business address:

234 1ST STREET
BONITA SPRINGS, FL. 34134

The mailing address of the corporation is:

234 1ST STREET
BONITA SPRINGS, FL. 34134

Article III

The purpose for which this corporation is organized is:

CHIROPRACTIC MEDICINE

Article IV

The number of shares the corporation is authorized to issue is:

1

Article V

The name and Florida street address of the registered agent is:

LYNN M SARKELA DC
234 1ST STREET
BONITA SPRINGS, FL. 34134

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: LYNN M SARKELA, DC

P13000093635
FILED
November 18, 2013
Sec. Of State
jbryan

Article VI

The name and address of the incorporator is:

LYNN M SARKELA, DC
234 1ST STREET

BONITA SPRINGS, FL 34134

Electronic Signature of Incorporator: LYNN M SARKELA, DC

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P
LYNN M SARKELA DC
234 1ST STREET
BONITA SPRINGS, FL. 34134

Article VIII

The effective date for this corporation shall be:

01/01/2014