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FLORIDA PROFIT/NON PROFIT CORPORATION  
WEST PALM PREMIER CHIROPRACTIC INC

Certificate of Status	1
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ARTICLES OF INCORPORATION 2014 FEB 18 AM 11:54  
OF

**WEST PALM PREMIER CHIROPRACTIC, 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: WEST PALM PREMIER CHIROPRACTIC, INC.**

**PHYSICAL ADDRESS: 2695 N. Military Trail, Suite 9  
West Palm Beach, FL 33409**

**MAILING ADDRESS: 2695 N. Military Trail, Suite 9  
West Palm Beach, FL 33409**

**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:

Name: MAXENE CANTON

Address: 2695 N MILITARY TRAIL, SUITE 9

WEST PALM BEACH, FL 33409

**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: MAXENE CANTON, PRESIDENT

Address: 2695 N MILITARY TRAIL, SUITE 9

WEST PALM BEACH, FL 33409

**ARTICLE VII - INCORPORATORS**

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

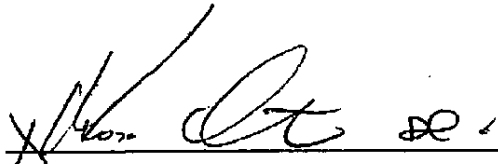
Name: MAXENE CANTON, PRESIDENT

Address: 2695 N MILITARY TRAIL, SUITE 9


WEST PALM BEACH, FL 33409

\*\*\*\*\*

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

  
MAXENE CANTON / Registered Agent

  
Date

  
MAXENE CANTON / Incorporator

  
Date

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