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**FLORIDA PROFIT/NON PROFIT CORPORATION
WELLNESS SOLUTIONS PSYCHOTHERAPY AND
BEHAVIORAL HEAL**

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

H15000005165

(4)
ARTICLES OF INCORPORATION
OF

WELLNESS SOLUTIONS PSYCHOTHERAPY AND
BEHAVIORAL HEALTH CONSULTING, INC.

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

ARTICLE I

The name of this Corporation shall be:

WELLNESS SOLUTIONS PSYCHOTHERAPY AND
BEHAVIORAL HEALTH CONSULTING, INC.

ARTICLE II

The principal place of business/mailling address is:

15945 84TH AVE. NORTH
PALM BEACH GARDENS, FL 33418

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 one (1) director 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:

MARTIN P. THOMPSON
15945 84TH AVE. NORTH
PALM BEACH GARDENS, FL 33418

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ARTICLE VI

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

MARTIN P. THOMPSON
15945 84TH AVE. NORTH
PALM BEACH GARDENS, FL 33418

ARTICLE VII

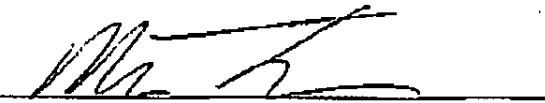
The name and address of the incorporator of this corporation is:

MARTIN P. THOMPSON
15945 84TH AVE. NORTH
PALM BEACH GARDENS, FL 33418

ARTICLE VIII

THE START DATE OF THIS CORPORATION WILL BE
JANUARY 1, 2015

SIGNATURE



MARTIN P. THOMPSON, Incorporator

TITLE: President

DATE: 1/7/15

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:

**WELLNESS SOLUTIONS PSYCHOTHERAPY AND
BEHAVIORAL HEALTH CONSULTING, INC.**

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

**MARTIN P. THOMPSON
15945 84TH AVE. NORTH
PALM BEACH GARDENS, FL 33418**

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: 

MARTIN P. THOMPSON, Registered Agent

DATE: 1/7/15

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STATE OF FLORIDA
TALLAHASSEE