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Account Name : THE LAW OFFICES OF NICK SPRADLIN

Account Number : I2007000020

Phone

: (813)435-31/6

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FLORIDA PROFIT/NON PROFIT CORPORATION James H. Taylor DO PA

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Wednesday, December 09, 2015

DEC 10 2015

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

he name of the corpo	COLD AL ARCHAE		~ ~ ~		
RTICLE II PRIM	Principal street address		Mailing address, if different is:		
443 Friendshin Wall		1443 Friendship Walku	/ay		
Fort Myers EL 3390		Fort Myers 33901			
RTICLE III PUR	<u>POSE</u>				
Practice of outpatient	professional medical care as an osteop	athic physician.			
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IRTICLE IV SHA	RFS 1000 shares at 10 cents par of stock is:	vale			
he number of shares	of stock is:	<u>.</u>			
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he number of shares	IAL OFFICERS AND/OR DIRECTOR James H. Taylor DPST 1443 Friendship Walkway Fort Myers FL 33901	Name and Title:Address:			
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The number of shares in the number of shares in the interest i	IAL OFFICERS AND/OR DIRECTOR Itle: 1443 Friendship Walkway Fort Myers FL 33901	Name and Title: Address: Name and Title: Address: Name and Title: Name and Title:			

Name and Title:		Name and Title:		
Address		Address:		
	·			
ARTICLE VI The name and F	<i>REGISTERED AGENT</i> Jorida st <u>reet address</u> (P.O. Box NOT acceptable)	of the registered agent is:		
Name:	The Law Offices Of Nick Spradlin, PLLC	- -		
Address:	2202 N. WEST SHORE BLVD. #200	· · ·		
Addition.	TAMPA, FL 33607			
		-		
ARTICLE VII	INCORPORATOR			
The name and a	ddress of the Incorporator is:		•	
Name:	Nickolas J. Spradlin Esq.			
Address:	2202 N. WEST SHORE BLVD. #200			
	TAMPA, FL 33607	<u> </u>		
ARTICLE VIII	EFFECTIVE DATE:			
Effective date, if	other than the date of filing:	(OPTIONAL)		
(If an effective of days after the fi	late is listed, the date must he specific and can	not be more than five busin	ess days prior or 90 business	
Note: If the date the document's e	e inserted in this block does not meet the applicab effective date on the Department of State's record	ole statutory filing requiremen s.	ts, this date will not be listed as	
Having been nat this certificate, I	med as registered agent to accept service of proc am familiar with and accept the appointment as	ess for the above stated corporegistered agent and agree to	ration at the place designated in act in this capacity	
16			12/09/2015	
<u>/ </u>	Required Signature/Registered Agent	and the commence of the Angels within	Date	
	cument and affirm that the facts stated herein a Department of State constitutes a third degree fe			
1/3/6			12/09/2015	
Requ	red Signature/Incorporator		Date	