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SPORTS MEDICINE TRAINING INSTITUTE, INC

TYPE OF FILING: ARTICLES

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78.75

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

## ARTICLES OF INCORPORATION

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

The name of the corporat	ion shall be: Sports Medicine Training In	stitute, Inc.				
	IPAI. OFFICE Principal <u>street</u> address		Mailing ad	dress, if different	is:	
340 S. Lemon Avenue #	#6405N					
Walnut, CA 91789		_				
ARTICLE III PURPO The purpose for which the	OSE the corporation is organized is:		•			
Develop and license a s	ports non-surgical, medical training platf	orm; establis	sh a Chinese subsi	diary to license th	ne train	ing
platform; and open non-	surgical sports medical clinics in China.	. •				
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				÷ .	12	,
				. 1	7	• ;
ARTICLE IV SHARE The number of shares of					9: 4	٠
ARTICLE V INITIA	L OFFICERS AND/OR DIRECTORS					
Name and Title		Name an	ıd Title:			
Address	340 S. Lemon Avenue #6405N	Address	:			
	Walnut, CA 91789	_				<b>-</b>
	-	<del></del> -				
Name and Title:		Name an	nd Title:	- , <u>-</u>		
Address		Address	:			
		_		-		
Name and Title:		Name an	nd Title:			
Address	<del>_</del>	Address	:			

Name ar	nd Title:	Name and Title:
Addres:	5	Address:
	REGISTERED AGENT lorida street address (P.O. Box NOT accept	able) of the registered arout is:
Name:	Registered Agent Solutions, Inc.	
Address:	155 Office Plaza Dr., Suite A	
T	Taliahassee, FL 32301	<del></del>
ARTICLE VII	<u>INCORPORATOR</u>	TB JUN
The <u>name and a</u>	ddress of the Incorporator is:	<b>Ž</b>
Name:	Mary Pat Curran - Paralegal	*** N
Address:	9401 Wilshire Boulevard #900	
	Beverly Hills, CA 90212	<del></del> 9: 4 <u>-</u>
Effective date, if (If an effective of filing.)  Note: If the date	date is listed, the date must be specific and	. (OPTIONAL)  cannot be more than five days prior or 90 days after the  licable statutory filing requirements, this date will not be listed as
Having been na this certificate, I	med as registered agent to accept service of j am familiar with and accept the appointmen	process for the above stated corporation at the place designated it t as registered agent and agree to act in this capacity
Sandin	Required Signature/Registered Age	6/12/18
$\bigcup$	Required Signature/Registered Age	nt Darc
locument to the	Department of State constitutes a third degre	In are true. I am aware that the false information submitted in efelony as provided for in $\pm 817.155$ , F.S.
mary	far Curran	6/11/2018
(£Zah	red Signature/Incorporator	Date

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