

**Electronic Articles of Incorporation  
For**

P22000091217  
FILED  
December 08, 2022  
Sec. Of State  
crico

MAPLE CARE CHIROPRACTIC AND REHAB INC

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:

MAPLE CARE CHIROPRACTIC AND REHAB INC

**Article II**

The principal place of business address:

1500 NW 62ND ST  
421  
FORT LAUDERDALE, FL. 33309

The mailing address of the corporation is:

1500 NW 62ND ST  
421  
FORT LAUDERDALE, FL. 33309

**Article III**

The purpose for which this corporation is organized is:

PRACTICE OF CHIROPRACTIC

**Article IV**

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

100

**Article V**

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

MICHAEL CRAWFORD  
11043 LAKELAND CIR  
FORT MYERS, FL. 33913

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

Registered Agent Signature: MICHAEL CRAWFORD, DC

P22000091217  
FILED  
December 08, 2022  
Sec. Of State  
crico

## Article VI

The name and address of the incorporator is:

MICHAEL CRAWFORD  
1500 NW 62ND ST  
STE 421  
FORT LAUDERDALE, FL 33309

Electronic Signature of Incorporator: MICHAEL CRAWFORD, 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  
MICHAEL CRAWFORD  
11043 LAKELAND CIR  
FORT MYERS, FL. 33913

## Article VIII

The effective date for this corporation shall be:

12/08/2022