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FBI MIAMI

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Winter Springs, FL 32708

1-407-365-7152

TO
Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

DATE
March 13, 1995
SUBJECT

Gentlemen :

Enclosed is Charter in duplicate of UNIVERSITY CHIROPRACTIC, INC.,
together with check to your order in the sum of \$87.50 to cover
filing fee,

Kindly forward receipt.

Sincerely yours,

Miriam Beckerman

Miriam Beckerman

ARTICLES OF INCORPORATION

OF

UNIVERSITY CHIROPRACTIC, INC.

The undersigned, does hereby incorporate, as a Florida corporation:

a) UNIVERSITY CHIROPRACTIC, INC.

b) This corporation shall have perpetual existence and shall be deemed to have commenced its corporate existence effective opening of business

c) This corporation is initially organized to engage in the practice of chiropractic medicine and all practices, procedures and treatments appurtenant and incidental thereto;

but may be expanded to include the transaction of any or all lawful business for which corporations may be incorporated under Chapter 607.011, F.S.A., and all subsequent amendments thereto.

d) This corporation shall be authorized to issue fifty shares of \$_____ no _____, par common stock.

e) No preemptive right is to be granted to the shareholders of this company.

f) The street address of this company's initial registered office shall be
10157 University Boulevard
Orlando, FL 32817

and the name of its initial registered agent at that address shall be ALAN D. NEWMAN
10157 University Boulevards, Orlando, FL 32817

g) The initial Board of Directors shall consist of one or more person(s), to-wit:
ALAN D. NEWMAN
10157 University Boulevard, Orlando, FL 32817

Director's action may be taken without meetings.

b) The Incorporator of this corporation is

ALAN D. NEWMAN
10157 University Boulevard, Orlando, FL 32817

1) These Articles or the By-Laws to be hereinafter
enacted may be amended by the Board of Directors or a majority
of the stockholders at any time.

IN WITNESS WHEREOF, I have hereunto set my hand
and seal on this 8th day of March, 1995.

Alan D. Newman SEAL
Alan D. Newman

STATE OF FLORIDA)
COUNTY OF DADE) SS:

I HEREBY CERTIFY that on this day, before me, a Notary
Public duly authorized in the State and County above named to
take acknowledgments, personally appeared ALAN D. NEWMAN
to me known to be the person described
in as subscriber in and who executed the foregoing Articles of
Incorporation.

WITNESS my hand and official seal in the County and State
named above, this 8th day of March, 1995.

William Beckman
Notary Public, State of Florida
at Large

My Commission Expires:

10/26/95

IN COMPLIANCE with Section 48.091, Florida Statutes
UNIVERSITY CHIROPRACTIC, INC.

with its principal office located at
10157 University Boulevard, Orlando, FL 32817

has named

ALAN D. NEWMAN
10157 University Boulevard, Orlando, FL 32817
as its agent to accept process within the State.

ACKNOWLEDGMENT: Having been named Resident Agent and de-
signated as the person authorized to accept service of process
for the above stated corporation, at the place designated in
this certificate, I hereby accept the appointment to act in said
capacity, and agree to comply with the provisions of said Act
relative to keeping said office open.

Alan D. Newman
REGISTERED AGENT