

P95000025727

TRANSMITTAL LETTER

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

SUBJECT: WELLNESS Professional Group, Inc.
(Proposed corporate name - must include suffix)

100001443161
-03/29/95--01094--004
****122.50 ****122.50

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM:

DAVID M. DARTON
Name (printed or typed)

7625 PARKVIEW WAY
Address

Coral Springs, FL 33065
City, State & Zip

305-342428
Daytime Telephone number

FILED
95 MAR 29 AM 11:22

NOTE: Please provide the original and one copy of the articles.

95 MAR 28 11:11:22
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

WELLNESS Professional Group, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7625 PARKVIEW WAY, Coral Springs, FL 33065

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**DAVID M. DARTON
7625 PARKVIEW WAY
Coral Springs, FL 33065**


ARTICLE V INCORPORATOR(S)


The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

DAVID M. DATHON
7625 PARKVIEW Way
Coral Springs, Fl. 33065

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

20th day of FEBRUARY 19 95.



Signature


Signature

Signature

Articles of Incorporation
Filing Fee - \$35

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: WELLNESS PROFESSIONAL
GROUP, INC.

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

DAVID M. DATHON
(Name)
7625 PARKVIEW WAY
(P.O. Box not acceptable)
COVAL SPRINGS, FL. 33065
(City/State/Zip)

FILED
95 MAR 28 PM 11:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

David M. Dathon
(Signature)

FEB. 20th 1995
(Date)