

P 96000010148 Chart Number Only

1-29-96

Requestor's Name Carom Speas
Address 825 Collin Ave. 8th Floor
Miami Beach, FL 33139
City State ZIP Phone
531-4007

VALIDATION ONLY

FILED
96 FEB -1 PM 12:30
TALLAHASSEE, FLORIDA


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-01/30/96--01054--003
****122.50 ****122.50

CORPORATION(S) NAME

Aubrey Medical Alternatives Unlimited

- Profit
- NonProfit
- Foreign
- Limited Partnership
- Reinstatement
- Certified Copy
- Call When Ready
- Walk In
- Amendment
- Dissolution
- Annual Report
- Reservation
- Photo Copies
- Call If Problem
- Will Wait
- Merger
- Mark
- Other
- Change of Registered Agent
- Certificate Under Seal
- After 4:30
- Mail Out

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96 MAR 30
DIVISION OF REGISTRATION

 Toll Free: 1-800-432-3028

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

CERTIFIED COPY W96-2278

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F. CHESSEB FEB 1 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

January 30, 1996

EMPIRE

TALLAHASSEE, FL 32301

SUBJECT: AUBREY MEDICAL ALTERNATIVES UNLIMITED
Ref. Number: W96000002278

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95 FEB -1 PM 12:33
TALLAHASSEE, FLORIDA

We have received your document for AUBREY MEDICAL ALTERNATIVES UNLIMITED and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6904.

Freida Chesser
Corporate Specialist

Letter Number: 496A00004029

ARTICLES OF INCORPORATION

THE UNDERSIGNED has executed the following document as incorporator of the below named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties, and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

ARTICLE I

The name of this corporation shall be:

AUBREY MEDICAL ALTERNATIVES, INC.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory, or nation.

ARTICLE IV

The aggregate number of shares of stock which this corporation shall have authority to issue is 100 shares, having a par value of One Dollar (\$1.00) per share. Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE V

The street address of the initial registered office and the

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TALLAHASSEE, FLORIDA

name of the initial registered agent of this corporation shall be:
CARON SPEAS, 825 Collins Avenue, Suite #8, Miami Beach, Florida
33139.

ARTICLE VI

The initial Board of Directors shall consist of a total of one
(1) person, and the name and address of that person is: SUZANNE
AUBREY, 825 Collins Ave., Suite #8, Miami Beach, Florida 33139.

ARTICLE VII

The names and addresses of the initial officers of this
corporation are:

President/Treasurer/ Vice-President/Sec'ty	SUZANNE AUBREY	825 Collins Ave. #8 Miami Beach, FL 33139
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ARTICLE VIII

The principal place of business for this corporation shall be:
4001 Hollywood Blvd., Hollywood, Florida 33021.

IN WITNESS WHEREOF, the undersigned incorporator has executed
these Articles of Incorporation this 29th day of January, 1996.



SUZANNE AUBREY

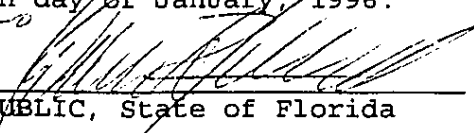
STATE OF FLORIDA
COUNTY OF DADE

BEFORE ME, the undersigned authority, personally appeared
SUZANNE AUBREY, known to me to be the person who executed the
foregoing Articles of Incorporation. In witness whereof, I have
hereunto set my hand and seal this 29th day of January, 1996.



DAVID B FOGEL
My Commission CC513337
Expires Nov. 30, 1999

PL # A110 79346967-0



NOTARY PUBLIC, State of Florida

My Commission Expires: *November 30, 1999*

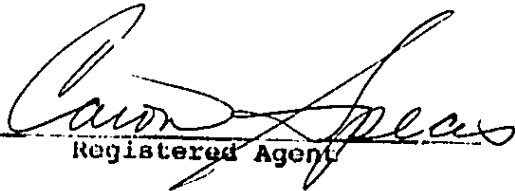
CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, 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.

First that AUDREY MEDICAL ALTERNATIVES, INC.
(Name of Corporation)
desiring to organize under the laws of the State of FLORIDA
(Florida)
with its principal office, as indicated in the articles of incorporation has named CARON SPEAS
(Name of Registered Agent)
located at Miami Beach, FL (City) 825 Collins Ave. #8, County of Dade (County)
State of Florida, as its agent to accept service of process within this state.

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.

SIGNATURE


Registered Agent

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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