

P96000026925

Thomas W. Lager
(Requestor's Name)
354 Office Plaza
(Address)
Tallahassee, FL 32301 877-0112
(City, State, Zip) (Phone #)

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OFFICE USE ONLY

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96 MAR 27 PM 12 24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Restara Health, Inc.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☐ Pick up time _____ ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/> Profit	
<input type="checkbox"/> NonProfit	
<input type="checkbox"/> Limited Liability	
<input type="checkbox"/> Domestication	
<input type="checkbox"/> Other	

AMENDMENTS	
<input type="checkbox"/> Amendment	
<input type="checkbox"/> Resignation of R.A., Officer/Director	
<input type="checkbox"/> Change of Registered Agent	
<input type="checkbox"/> Dissolution/Withdrawal	
<input type="checkbox"/> Merger	

OTHER FILINGS	
<input type="checkbox"/> Annual Report	
<input type="checkbox"/> Fictitious Name	
<input type="checkbox"/> Name Reservation	

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/> Foreign	
<input type="checkbox"/> Limited Partnership	
<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Trademark	
<input type="checkbox"/> Other	

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DIVISION OF CORPORATION

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a problem
3/27/95

Examiner's Initials

ARTICLES OF INCORPORATION
OF
RESTORE HEALTH, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned sole incorporator, being a natural person competent to contract and desiring to form a corporation under Title XXXV, Chapter 607, of the revised Florida Statutes, herewith submits the following information:

1. The name of the corporation is RESTORE HEALTH, INC.
2. The duration of the corporation shall be perpetual.
3. The general purpose(s) for which this corporation is being formed are to include the transaction of any or all lawful business for which corporations may be incorporated under this Chapter.
4. The aggregate number of shares which the corporation shall have authority to issue is one thousand (1,000), all without par value and of one class.
5. The principal address and mailing address of the corporation will be 2907 Kerry Forest Parkway, Tallahassee, Florida 32308.
6. The name of its initial Resident Agent is Thomas W. Lager, Esquire, 354 Office Plaza, Tallahassee, Florida 32301.
7. The number of Directors constituting the initial Board of Directors is one (1) and the name and address of each person who is to serve as a member thereof is as follows:

Charles H. Wingo, M.D.
6420 Thomasville Road
Tallahassee, Florida 32308

8. The name and address of the sole incorporator is:

Charles H. Wingo, M.D.
6420 Thomasville Road
Tallahassee, Florida 32308

IN WITNESS WHEREOF, the undersigned, as sole incorporator of this corporation has executed these ARTICLES OF INCORPORATION.

DATE: 3/26/96

[Signature]
CHARLES H. WINGO, M.D.

STATE OF FLORIDA
COUNTY OF LEON

The foregoing instrument was acknowledged before me this 26th day of March, 1996, by CHARLES H. WINGO, M.D., who is personally known to me or who has produced personally known as identification and who did/did not take an oath.

[Signature]
NOTARY PUBLIC

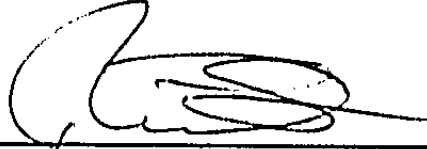
Printed Name: L. MCANALLY

My Commission Expires



L. MCANALLY
MY COMMISSION # CC280151 EXPIRES
April 26, 1997
BONDED THROUGH TROY FAIR INSURANCE, INC.

I, the undersigned, hereby accept appointment as Resident Agent of the above-named corporation.



THOMAS W. LAGER
354 Office Plaza
Tallahassee, Florida 32301

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TALLAHASSEE, FLORIDA