P9600036104 TRANSMITTAL LETTER

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

SUBJECT: ROTH CHIROPRACTIC, P.A.

800001791319 -04/23/96--01151--019 ****131.25

·		(Proposed corporate i	namo - must includo su	iffx)	•	
Enclose for :	d is an original of the filling Fee	and one (1) copy of the copy o	of the articles of inc \$122.50 Filing Fea & Certified Copy	\$131.25 Filing Fee, Certified Copy, & Certificate	SS P	1
	FROM:	John D.Roth	,	ָּט ט	22	l
		Name (Prin	ted or typed)	·	ng B	1
		7064 Beracas	sa Way	ţ	PH 2: 49)
		Ad	dress		STATE A	
	•	Boca Raton, F	lorida 33433			
		City, St	ate & Zip			
		(407) 392-17	77			
		Daytime Tele	phone number			
			•			

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

APR 2 5 199

96 APR 22 PH 2: 1,9
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION OF ROTH CHIROPRACTIC, P.A.

I, the undersigned, for the purpose of forming a corporation under the laws of the State of Florida as the same may from time to time exist, hereby certify as follows:

ARTICLE 1. NAME

The name of this Professional Corporation is ROTH CHIROPRACTIC, P.A.

ARTICLE 11. ADDRESS

The initial street address of the office of this corporation in the State of Florida is 7064 Berneasa Way, Boca Raton, Florida 33433

ARTICLE 111.NATURE of BUSINESS

The general nature of the business to be conducted by the corporation, together with its powers and purpose are as follows, to-wit:

a) Chiropractice care

ARTICLE 1V. DIRECTORS

The affairs of this corporation shall be managed by its Stockholders and Director, John D. Roth, D.C., in the manner provided by the by-laws and in conformance with applicable Florida Statues.

ARTICLE V, TERM OF EXISTENCE

The corporation is to exist perpetually.

ARTICLE VI. REGESTERED AGENT AND ADDRESS

The registered office of this corporation is 7064 Berneasa Way, Boca Raton, Florida 33433.

The Registered Agent of this corporation is

Dr. John D. Roth, D.C. 4422 Brandywine Drive Boes Raton, Florida 33433

ARTICLE VII. SUBSCRIBERS

The name and address of the subscribers of these Articles of Incorporation, the numbers of shares of stocks agreed to be bought, the value of the consideration thereof and the street address of the shareholders are as follows:

INCORPORATORS	ADDRESS	No of shares 70	Value \$70
John D Roth, D.C.	4422 Brandywine Drive Boca Raton 33431		
Linda Roth	4422 Brandywine Dr. Boca Raton 33431	30	30

ARTICLE VIII. MISCELLANEOUS

The Article of Incorpora may be amended in the manner provided by the by-laws and in a rdance with the provision of the applicable state laws.

In consent to the terms and coditions above, I have hereunto set our hands and seal this 13 hay of Becember, 1995: 170-1 1996

Joh O. R. th & (SEAL)

JOHN D ROTH, D. C.

STATE OF FLORIDA) COUNTY OF PALM BEACH)

Before me, a Notary Public, duly authorized in the State and County named above to take acknowledgements, personally appeared before me, John D. Roth to me known to be the person described as officer in and who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed and subscribed to these Articles of Incorporation dated

31996

(NOTARY SEAL)

MICHELLE S. NEEBAM

ANY COMMISSION & CC 519394

EXPIRES: Desember 16, 1989

Burdes: Thru Henry Halbe Underenting

Notary Public State of Florida

CERTIFICATE OF DESIGNATION BEGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Fiorida Statutes, the undersigned corporation, organized under the laws of the State of Fiorida, submits the following statement in designating the registered office/registered agent, in the state of Fiorida.

1. The name of the corporation is: ROTH CHTROPRACTIC, P.A.
2. The name and address of the registered agent and office is:
Dr. John D Roth
(NAME) (NAME)
(P.O. BOX NOT ACCEPTABLE)
Boca Raton, F1 33431
(CITY/STATE/ZIP)
SIGNATURE JOLD ROTH IC. (Corporate officer) TITLE OWNER - PRESIDENT DATE 4-12-96
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 OLD RATE DATE V-12-96
DATE 4-12-96

REGISTERED AGENT FILING FEE: \$35.00