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SANDS OF TIME HEALING CENTER, INC. 9830 FEATHERTREE LANE NORTH FORT MYERS, FLORIDA 33903

(941) 995-4777

96 JUN 10 AM 8: 00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

JUNE 3, 1996

Corporate Records Bureau Division of Corporations Department of State P O Box 6327 Tallahassee, FL 32301

900001857119 -06/11/96--01004--016 *****122.50

Dear Sir or Madam:

As Incorporator of the above named corporation, I am requesting a Charter from the State of Florida in order to start a business as a corporation in Florida

Enclosed are the following papers, together with our check:

- a. Original and one copy of Certificate of Incorporation for filing and approval by your office;
- b. Certificate of Registered Agent;
- c. Check to cover fees and costs in the amount of \$122.50.

\$35.00 to file Certificate \$52.50 for certified copy \$35.00 for Registered Agent Designation

Please return the certified copy as soon as possible.

Very truly yours, SANDS OF TIME HEALING CENTER, INC.

LILIAN L. PLUMMER PRESIDENT

enclosure :

PH12/54

ARTICLES OF INCORPORATION

OF

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96 JUN 10 AH 8: 00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

SANDS OF TIME HEALING CENTER, INC.

ARTICLE 1. CORPORATION NAME

The name of the corporation is: SANDS OF TIME HEALING CENTER, INC.

The address of the corporation is:

9830 FEATHERTREE LANE NORTH FORT MYERS, FLORIDA 33903

ARTICLE II. NATURE OF BUSINESS AND POWERS

The general nature of the business to be transacted by this Corporation is to engage in any and all business permitted under the laws of the State of Florida.

ARTICLE III. CAPITAL STOCK

The maximum number of share of stock that this Corporation is authorized to issue and have outstanding at any one time is 1,000 shares of common stock with a par value of \$1. (one dollar) per share.

ARTICLE IV. TERM OF EXISTENCE

This corporation shall have perpetual existence commencing upon issuance of the certificate of incorporation from the Secretary of State.

ARTICLE V. REGISTERED AGENT AND INITIAL REGISTERED

OFFICE

The Registered Agent and the street address of the initial Registered Office of this Corporation in the State of Florida shall be:

LILIAN L. PLUMMER 9830 FEATHERTREE LANE, NORTH FORT MYERS, FLORIDA 33903

The Board of Directors from time to time may move the Registered Office to any other address in the State of Florida.

ARTICLE VI. BOARD OF DIRECTORS

This Corporation shall have one(1) director initially. The number of directors may be increased or diminished from time to time by by-laws adopted by the stockholders, but shall never be less than one.

ARTICLE VII. INITIAL DIRECTOR

The name of the initial director of this Corporation and their street address is:

LILIAN L. PLUMMER 9830 FEATHERTREE LANE, NORTH FORT MYERS, FLORIDA 33903

The person named as the initial director shall hold office for the first year of existence of this Corporation or until their successors are elected or appointed and have qualified, whichever occurs first.

ARTICLE VIII. INCORPORATOR

The name and address of the person signing these Articles of Incorporation as the INCORPORATOR is:

LILIAN L. PLUMMER 9830 FEATHERTREE LANE NORTH FORT MYERS, FLORIDA 33903

ARITCLE IX. AMENDMENT

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders and approved at a stockholders meeting by at least a majority of the stockholders entitled to vote, unless all of the directors and all of the stockholders sign a written statement manifesting their intention that a certain amendment of these Articles of incorporation be made.

IN WITNESS WHEREOF, the undersigned, as INCORPORATOR, has executed the foregoing Articles of Incorporation on this 3.00 day of Dune, 19.96

HLIANY. PLUMMER

INCORPORATOR

My commission expires:

OTARY PUBLIC

ELEANOR JANE FLAK My Commission CC31846(Expire Sep. 23, 1987 Bonried by HAI

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96 JUN 10 AM 8:00

SECRETARY OF STATE and responsibilities and respons Registered Agent for SANDS OF TIME HEALING CENTER, INC.

LHLIAN L. PLUMMER REGISTERED AGENT

BEFORE ME, a Notary Public, personally appeared LILIAN L. PLUMMER to me known to be the person described as Registered Agent and who executed the foregoing instrument and he acknowledged before me that she executed the same.

WITNESS, my hand and official seal this 3rd day of June

My Commission Expires:

ELEANOR JANE FUNK My Commission GC318460 Expires Sep. 23, 1807 Bonded by HAI 000-422-1658

SANDS OF TIME HEALING CENTER, INC. 9830 FEATHERTRIE LAND NORTH FORT MYERS, FLORIDA 33903

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96 JUN 10 AM 6:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

In compliance with Section 48.091, Florida Statutes, the following is submitted:

First: That SANDS OF TIME HEALING CENTER, INC. is desiring to organize or qualify under the law of the State of Florida with its principal place of business at 9830 FEATHERTREE LANE, NORTH FORT MYERS, STATE OF FLORIDA, 33903, has named LILIAN L. PLUMMER, located at 9830 FEATHERTREE LANE, NORTH FORT MYERS, FLORIDA 33903, as its agent to accept service of process within Florida.

LILIAN L. PLUMPER

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Having been named to accept service of process for the above state corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duffes.

LILIAN L. PLUMMER REGISTERED AGENT

DATE