

P96000065661

Date 6-26-96

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399
Phone 904/487-6052

SUBJECT: INTERCOUNTY CHiropractic ASSOCIATES, INC.

To whom it may concern,

Enclosed is an original and one (1) copy of the articles of incorporation for the above captioned corporation, and a check in the amount of \$122.50.

~~Enclosed is also a copy of the articles of incorporation for the above captioned corporation, and a check in the amount of \$122.50.~~

Thanking you in advance for your attention to this matter.

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AUG 7 1996

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FILED
96 AUG -5 AM 8:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

INTERCOUNTY CHIROPODIC ASSOCIATES, INC.

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:

INTERCOUNTY CHIROPODIC ASSOCIATES, INC.

ARTICLE II PRINCIPAL OFFICE

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

INTERCOUNTY CHIROPODIC ASSOCIATES, INC.

2933 SW 3rd Ave.

MIAMI, FL 33129

ARTICLE III SHARES

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

Sixty (60)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LISA LITWAK

4746 SOUTH OCEAN BLVD. # 2

HIGHLAND BEACH, FL 33487

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TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATOR(S)

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

RON WELLER, D.C.
7555 NW 71 TERR.
PARKLAND, FL 33067

KEITH LITWAK, D.C.
4746 S. OCEAN BLVD
HIGHLAND BEACH, FL 33487

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 5TH day of JULY, 1996.

RON WELLER, D.C.

Signature

Keith Litwak, D.C.

Signature

**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: InterCountry Chiropractic Associates, Inc.
2. The name and address of the registered agent and office is:

LISA LITWAK

(Name)


4746 SOUTH OLIVER BLVD #8

(Address/P.O. Box NOT acceptable)

HIGHLAND BRANCH, FL 33487

(City/State/Zip)

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)

7/3/96

(Date)

FILED
JUL 5 1996
TALLAHASSEE, FLORIDA
CLERK OF SUPERIOR COURT