# CAPITAL CONNECTION, INC. 417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870

Mailing Address: Post Office Box 10349, Tallahassee, FL 32302

TOLL FREE No. 1-800-342-8062

FAX (504) 222-1222

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PHONE	( )
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	TAX on corporate supplies	s	
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Piease remit invoice number with payment TERMS: NET 10 DAYS FROM INVOICE DATE 1 1/2% per month on Past Due Amounts Past 30 Days, 18% per Annum.

THANK YOU from Your Capital Connection ARTICLES OF INCORPORATION

OF

ELECTROMED, P.A.

A PROFESSIONAL CORPORATION

96 OCT -4 AM 11: 28

SECRETARY OF STATE
TALLAMASSEE, FLORIDA

The undersigned, all of whom are duly licensed to practice medicine in the State of Florida, desiring to form a professional corporation in accordance with Chapter 607 of the Florida Statues and the Florida Professional Service Corporation Act, adopt the following Articles of Incorporation:

### ARTICLE ONE

### NAME

1. The name of the Corporation shall be ELECTROMED, P.A.

# ARTICLE TWO

# INITIAL REGISTERED OFFICE AND AGENT

2. The street address of initial corporate office of this corporation is 20423 State Road 7, #245, Boca Raton, Florida 33498. The registered office of this corporation is 20423 State Road 7, #245, Boca Raton, Florida 33498. The initial registered agent at the registered office is Dr. Brian kitteldorf.

### ARTICLE THREE

### PURPOSE

3. The purpose for which the Corporation is organized shall be to engage in the practice of chiropractic medicine, within the State of Florida, and to take all actions that are necessary or proper in connection with that practice.

### ARTICLE FOUR

# DURATION

The term of existence of the Corporation is perpetual.

### ARTICLE FIVE

### PROFESSIONAL SERVICES

5. The professional services of the Corporation shall be rendered only through officers, employees, and agents who are duly licensed or otherwise legally authorized to practice chiropractic medicine within the State of Florida. Professional services shall be rendered in each case by the officer, employee, or agent designated solely by this provision shall not be applicable to the extent it is in conflict with the law or the professional rules of legal practice.

### ARTICLE SIX

### **INCORPORATORS**

6. The name and post office address of the incorporation is:

NAME

**ADDRESS** 

BRIAN MITTELDORF

20423 State Road 7, #245 Boca Raton, Florida 33498

### ARTICLE SEVEN

### **DIRECTORS**

7. The Board of Directors shall consist of one member. The name and address of the first Board of Directors is:

NAME

**ADDRESS** 

BRIAN MITTELDORF

20423 State Road 7, #245 Boca Raton, Florida 33498

The business of the Corporation shall be managed by the shareholders of the Corporation rather than by a Board of Directors.

# ARTICLE EIGHT

# CAPITAL STOCK

8. The number of shares of stock that the Corporation is authorized to have outstanding is 100, all of which shall be common shares with par value of \$1.00.

### ARTICLE NINE

### STATED CAPITAL

9. The amount of capital with which the Corporation shall begin business is \$100.00.

### ARTICLE TEN

# AMENDMENT OF ARTICLES

10. The Corporation reserves the right to amend these Articles of Incorporation at any time in a manner now or subsequently permitted by statute. Any change authorized by the holders of shares entitling them to exercise a majority of the voting power of the Corporation, or any greater number that may then be required by statute, shall be binding and conclusive on every shareholder of the Corporation as fully as if each shareholder had voted for the change. No shareholder, notwithstanding that he or she may have be entitled to payment of the fair case value of his or her shares or any other rights of a dissenting shareholder.

IN WITNESS THEREOF, Incorporation on Alakasia	I have si	igned t	these	Articles	o£
	All				
	BRIAN MITTER Incorporate				

STATE OF FLORIDA
COUNTY OF HALM BEACH

On CATCAER 3 1996, before me WOTARY VUPLIC (title), the undersigned officer, personally appeared BRIAN MITTELDORF, known to me to be the person whose name is subscribed to this document, and acknowledged that he executed the document for the purposes contained within it.

IN WITNESS WHEREOF, I sign here and set my/official seal.

Sandra H. Musphy

My commission expires:



96 OCT -4 AMII: 28
TALLAHASSEE, FLORIDA

# ACCEPTANCE BY REGISTERED AGENT

Having been named to accept service of process for the above stated Corporation, at the place designated in Article II of these Articles of Incorporation, the undersigned hereby agrees to act in this capacity, and further agrees to comply with the complete discharge of its duties.

Dated this 3kg day of Cotober

Registered Agent