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**RUDI E. HEIDE, P.A.**

Enrolled to Practice Before the Internal Revenue Service

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
96 OCT 25 PM 1:22

October 11, 1996

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

Attached is a check in the amount of \$122.50 to cover the cost of filing fees,  
Registered Agent designation and a certified copy of the Articles of Incorporation  
for Wellness Professional Group of Treasure Coast, Inc. a Florida for-profit  
corporation.

Sincerely,

Rudi E. Heide

attach: Check  
Articles of Incorporation

800001991208--0  
-10/30/96--01116--014  
\*\*\*\*122.50 \*\*\*\*122.50

*Pamela S. Helyer* GAVE

AUTHORIZATION BY PHONE TO

CORRECT *Pring, Address*

DATE *10/28/96*

DOC EXAM *Wells Brown*

BROWN OCT 28 1996

SECRET FILED  
DIVISION OF CORPORATIONS  
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**ARTICLES OF INCORPORATION  
OF  
WELLNESS PROFESSIONAL GROUP OF TREASURE  
COAST, INC.**

**ARTICLE I NAME**

The name of this corporation is **WELLNESS PROFESSIONAL GROUP OF TREASURE COAST, INC.**

**ARTICLE II TERM OF CORPORATE EXISTENCE**

This corporation shall exist perpetually unless dissolved according to law and such existence shall commence at the time of filing of these Articles of Incorporation by the Department of State.

**ARTICLE III CORPORATE PURPOSE**

The corporation may engage in any activity of business permitted under the laws of the United States and the State of Florida.

**ARTICLE IV AUTHORIZED SHARES**

The Aggregate number of shares which the Corporation shall have the authority to issue is 1,000 shares of Common Stock with a \$1.00 par value per share. It is intended that stock issued by this corporation shall be in accordance with Sect 1244 of the Internal Revenue Code of 1986 as amended.

**ARTICLE V PREEMPTIVE RIGHTS**

Every shareholder, upon sale for cash of any new stock of this Corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro-rata share thereof at the same price at which it is offered to others.

**ARTICLE VI REGISTERED AGENT**

The initial registered office of the Corporation is located at 686 JORDAN AVENUE, SEBASTIAN, FL 32958. The initial registered agent is PAMELA J. HOLYK. The principal place of business is the same as the registered office.

#### ARTICLE VII DIRECTORS

The business of the Corporation shall be managed by a Board of Directors consisting of not fewer than one person, the exact number to be determined from time to time in accordance with the by-laws.

The name and address of the persons who shall serve as directors until the first meeting of shareholders or until her successor is elected and qualified are as follows:

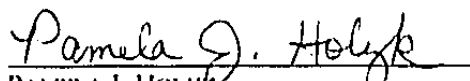
PAMELA J. HOLYK  
680 JORDAN AVENUE, SEBASTIAN, FL 32958

#### ARTICLE VIII INCORPORATORS

The name and address of the incorporator is:

PAMELA J. HOLYK  
680 JORDAN AVENUE, SEBASTIAN, FL 32958


**IN WITNESS WHEREOF**, the undersigned, being the original incorporator of the Corporation, has executed these Articles of Incorporation, on this 11th day of October, 1996.

  
PAMELA J. HOLYK

STATE OF FLORIDA     }  
COUNTY OF BREVARD    }

**I HEREBY CERTIFY** that on this day personally appeared before me the undersigned authority, PAMELA J. HOLYK, to me well known and well known to me to be the person who executed the foregoing instrument and acknowledged before me that she executed the same freely and voluntarily for the purposes therein set forth and expressed. Said person is personally known to me.

**IN WITNESS WHEREFORE**, I have hereunto set my hand and affixed my official seal this 11th day of October, 1996.

  
Norma M. Heide, Notary Public  
State of Florida, at-large  
My commission expires on October 6, 1998.



NORMA M. HEIDE  
MY COMMISSION # CC411933 EXPIRES  
October 6, 1998  
BONDED THRU TROY FARM INSURANCE, INC.

**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR  
THE SERVICE OF PROCESS WITHIN THIS STATE NAMING AGENT  
UPON WHOM PROCESS MAY BE SERVED**

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted in compliance with said act:

**WELLNESS PROFESSIONAL GROUP OF TREASURE COAST, Inc.**, desiring to organize under the laws of the State of Florida with its principal office as indicated in the Articles of Incorporation, in the City of Sebastian, County of Indian River, has named **PAMELA J. HOLYK**, 680 JORDAN AVENUE, SEBASTIAN, FL 32958 , as its agent to accept service of process within the State.

**ACKNOWLEDGMENT:**

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby accept to act in this capacity, and to comply with the provision of said Act relative to keeping said office open.

*Pamela J. Holyk*  
PAMELA J. HOLYK

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