

P97000001444
TRANSMITTAL LETTER

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

SUBJECT: SPINE INSTITUTE, chartered
(Proposed corporate name - must include suffix)

700002043127--9
-01/02/97--01021--001
****131.25 ****131.25

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: TED H. PERKINS
Name (Printed or typed)

2801 OCEAN DRIVE, SUITE 203
Address

VERO BEACH, FL 32963
City, State & Zip

561-234-3833
Daytime Telephone number

Susan Perkins GAVE
AUTHORIZATION BY PHONE TO
CORRECT PA Purpose
DATE 11/7/97
DOC. EXAM. qj

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 DEC 31 PM 3:52

EFFECTIVE DATE

01/01/97

ARTICLES OF INCORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 DEC 31 PM 3:52

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:

SPINE INSTITUTE, chartered

ARTICLE II PRINCIPAL OFFICE

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

2801 OCEAN DRIVE, SUITE 203
VERO BEACH, FL
32963

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

TED H. PERKINS
2801 OCEAN DRIVE, SUITE 203
VERO BEACH, FL
32963

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

TED H. PERKINS D.C., PRESIDENT
2801 OCEAN DRIVE, SUITE 203
VERO BEACH, FL
32963

ARTICLE VI SPECIFIC PURPOSE: Chiropractic Medical Rehab Healthservices.

ARTICLE VII EFFECTIVE DATE: JANUARY 01, 1997

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

12 day of DECEMBER, 19 96.

(An additional article must be added if an effective date is requested.)

Ted H. Perkins
Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

96 DEC 31 PM 3:52

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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 SPINE INSTITUTE, chartered

2. The name and address of the registered agent and office is:

TED H. PERKINS

(NAME)

2801 OCEAN DRIVE, SUITE 203

(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

VERO BEACH, FL 32963

(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.

Ted H. Perkins

(SIGNATURE)

Dec. 12, 1996

(DATE)