

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 (904) 222-1222

NAME _____

FIRM _____

ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

NR R96-4917

REQUEST TAKEN CONFIRMED APPROVED

DATE 1/23/97 _____

TIME 4:55 _____ CK No. _____

BY CD/DK _____

WALK-IN Will Pick Up _____

RE: Non-renewable

	C.C. FEE.	DISBURSED
<input checked="" type="checkbox"/> Capital Express™		
<input checked="" type="checkbox"/> Art. of Inc. File		
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership File		
<input type="checkbox"/> Foreign Corp. File		
<input checked="" type="checkbox"/> () Cert. Copy(s) <u>Photo</u>		
<input type="checkbox"/> Art. of Amend. File		
<input type="checkbox"/> Dissolution/Withdrawal		
<input type="checkbox"/> C U S-		
<input type="checkbox"/> Fictitious Name File		
<input type="checkbox"/> Name Reservation		
<input type="checkbox"/> Annual Report/Reinstatement		
<input type="checkbox"/> Reg. Agent Service		
<input type="checkbox"/> Document Filing		
<input type="checkbox"/> Corporate Kit		
<input type="checkbox"/> Vehicle Search		
<input type="checkbox"/> Driving Record		
<input type="checkbox"/> Document Retrieval		
<input type="checkbox"/> UCC 1 or 3 File		
<input type="checkbox"/> UCC 11 Search		
<input type="checkbox"/> UCC 11 Retrieval		
<input type="checkbox"/> File No.'s, _____ Copies		
<input type="checkbox"/> Courier Service		
<input type="checkbox"/> Shipping/Handling		
<input type="checkbox"/> Phone () _____		
<input type="checkbox"/> Top Priority		
<input type="checkbox"/> Express Mail Prep.		
<input type="checkbox"/> FAX () _____ pgs.		

SUBTOTALS _____

FEE.....	
DISBURSED.....	
SURCHARGE.....	
TAX on corporate supplies.....	
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

Please 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



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

OCT 17 1996

October 14, 1996

LYNNE WALDER, ESQ.
777 S. HARBOUR ISLAND BLVD.
SUITE 175
TAMPA, FL 33602

The name THE CENTER FOR HEALING, INC. has been reserved for 120 days beginning October 14, 1996. The reservation number is R96000004917 and this reservation is **NONRENEWABLE**.

A reservation is not a grant of authority to use the name. It is only a withholding of a name from its availability for use by another. When the proposed document is submitted, the name will **AGAIN** be checked against the records of the Division and if still no conflict exists and all other requirements are fulfilled, the reserved name shall be filed as the entity name.

The Division of Corporations is a ministerial filing office and may not render any legal advice. The Division does not adjudicate the legality of any corporate name or arbitrate disputes between entities. You may wish to review other laws such as common law rights, including rights to a trade name; United States Code, Federal Trademark Act, Section 1051 (Lanham Act); Chapter 495, Florida Statutes, Registration of Trademarks and Service Marks (Florida Trademark Act); and Section 865.09, Florida Statutes (Fictitious Name Act).

If someone else submits the document for filing, it must have a copy of this letter attached.

Should you have any questions regarding this matter, please telephone (904) 488-9000, the Name Availability Section

Becky McKnight

Letter number: 196A00046665

**ARTICLES OF INCORPORATION
OF
THE CENTER FOR HEALING, INC.**

FILED
97 JAN 24 AM 9:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a corporation under the Florida Business Corporation Act, Florida Statutes Chapter 607, does hereby make and adopt the following Articles of Incorporation:

ARTICLE I. Corporate Name and Address

The name of this corporation is **THE CENTER FOR HEALING, INC.** The principal place of business shall be 1045 9th Avenue North, St. Petersburg, Florida 33705 and the mailing address of the corporation is 1045 9th Avenue North, St. Petersburg, Florida 33705.

ARTICLE II. Authorized Shares

The Corporation is authorized to issue one class of shares, which shall be called common shares. Common shares shall have unlimited voting rights and shall be entitled to receive the net assets of the Corporation upon dissolution. The Corporation is authorized to issue 1000 common shares.

ARTICLE III. Commencement of Corporate Existence

In accordance with the laws of the State of Florida, the corporate existence shall commence on the date of the filing of these Articles of Incorporation by the Secretary of the State of Florida.

ARTICLE IV. Duration

The duration (term) of this Corporation is perpetual.

ARTICLE V. Initial Registered Office and Agent

The street address of the initial Registered Office of the Corporation is 1045 9th Avenue North, St. Petersburg, Florida 33705 and the name of its initial Registered Agent is Haris Lender-Rubin.

ARTICLE VI. Initial Board of Directors

The number of Directors constituting the initial Board of Directors is two. The number of directors may be increased or decreased from time to time in accordance with the Bylaws but shall never be less than one. The name and address of each initial Director of the Corporation is as follows:

Name	Address
<u>Scott A. Rubin</u>	<u>635 13th Avenue NE St. Petersburg, FL 33701</u>
<u>Haris Lender-Rubin</u>	<u>635 13th Avenue NE St. Petersburg, FL 33701</u>

ARTICLE VII. Incorporators

The name and address of each incorporator is as follows:

Name	Address
<u>Scott A. Rubin</u>	<u>635 13th Avenue NE St. Petersburg, FL 33701</u>
<u>Haris Lender-Rubin</u>	<u>635 13th Avenue NE St. Petersburg, FL 33701</u>

ARTICLE VIII. Officers

The officers of the Corporation shall consist of a President, Secretary, Treasurer and such other Officers and Assistant Officers as may be provided in the By Laws or by resolution of the Board of Directors. Each Officer shall be elected by a majority vote of the Board of Directors (and may be removed by majority vote of the Board of Directors) at such time and in such manner as may be prescribed by the By Laws, these Articles or by law. The name and address of each initial Officer of the Corporation is as follows:

Name	Office	Address
<u>Haris Lender-Rubin</u>	President	<u>635 13th Avenue NE St. Petersburg, FL 33701</u>
<u>Scott A. Rubin</u>	VP/Treas.	<u>635 13th Avenue NE St. Petersburg, FL 33701</u>
<u>Scott A. Rubin</u>	Secretary	<u>635 13th Avenue NE St. Petersburg, FL 33701</u>

ARTICLE IX. By Laws

The By Laws of the Corporation are to be made and adopted by the Board of Directors, and may be altered, amended or rescinded by the Board of Directors.

ARTICLE X. Amendment

The Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation or any amendment to them. The Articles of Incorporation may be amended in accordance with the provisions of the laws of the State of Florida, as amended from time to time, unless more specific provisions for amendments are adopted by the Corporation pursuant to law.

ARTICLE XI. Indemnification

The Corporation shall indemnify each Director and Officer, including former Directors and Officers, to the full extent permitted by the laws of the State of Florida. It is intended that the Corporation be an organization the Directors and Officers of which are immune from civil liability to the extent provided under Florida Statutes Chapter 617 and other similar laws.

IN WITNESS WHEREOF, the undersigned has signed these Articles of Incorporation this 20 day of January, 1997.

Scott A. Rubin
Scott A. Rubin, Incorporator

Haris Lender-Rubin
Haris Lender-Rubin, Incorporator

STATE OF FLORIDA
COUNTY OF PINELLAS

The foregoing Articles of Incorporation were acknowledged before me this 21 day of January, 1997, by Scott A. Rubin and Haris Lender-Rubin.



(SEAL)

Lynne Walder
Notary Public - State of Florida
My Commission expires:

☒ Personally known

☐ Produced Identification

Type of Identification produced _____

ACCEPTANCE BY REGISTERED AGENT

I, the undersigned person, having been named as registered agent and to accept service of process for the above-stated corporation at the place designated in this statement, hereby accept this 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.

Dated this 20 day of January, 1997.



Haris Lender-Rubin, Registered Agent

FILED
97 JAN 24 AM 9:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA