SUNNER & SUNNER

Attorneys and Counselors at Law

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RICHARD G. SU

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

800002071368----01/28/97--01170--004 ****122.50 ****122.50

Re: Incorporation of:

- Hoffner Family Chiropractic 1.
- 2. Orange Rehab

Enclosed are the original and one copy of the two (2) sets of articles of incorporation and certificate of designations, registered agent/registered office for the above-named proposed Florida corporations. Also enclosed are two checks in the amount of \$122.50, representing the fees for filings and certified copies.

Thank you for your assistance in this matter.

Sincerely yours,

Kelly Gunnoe

Legal Assistant

klg Enclosures

ARTICLES OF INCORPORATION

OF .

HOFFNER FAMILY CHIROPRACTIC, THE.

97 JAN 27 AM II: 04
SECRETARY OF STATE
TALLAHASSEE FLORIDA

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation shall be:

Hoffner Family Chiropractic, INC.

The principal place of business and street address of this corporation shall be 5425 S. Semoran Boulevard, Suite A3, Orlando, Florida 32822, and the mailing address of the corporation shall be 5425 S. Semoran Boulevard, Suite A3, Orlando, Florida 32822.

ARTICLE II: NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III: CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares of common stock having a one dollar (\$1.00) par value per share.

ARTICLE IV: REGISTERED AGENT AND ADDRESS

The street address of the registered agent of the corporation shall be 5425 S. Semoran Boulevard, Suite A3, Orlando, Florida 32822, and the name of the registered agent of the corporation at that address is Chris Catalfo.

ARTICLE V: TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI: DIRECTORS

All corporate powers shall be exercised by or under the authority of, and the business and affairs of the corporation managed under the direction of its Board of Directors, subject to any limitation set forth in these Articles of Incorporation. This corporation shall have two (2) Directors, initially. The names and street addresses of the initial members of the Board of Directors are:

Chris Catalfo, 5425 S. Semoran Boulevard, Suite A3, Orlando, Florida 32822 ARTICLE VII:

The names and addresses of the initial officers of the corporation who shall hold office for the first year of the corporation, or until their successors are elected or appointed are:

Chris Catalfo	5425 S. Semoran Blvd. Suite A3
President	Orlando, Florida 32822

Chris Catalfo	5425 S. Semoran Blvd. Suite A3
Vice President	Orlando, Florida 32822

Chris Catalfo	5425 S. Semoran Blvd. Suite A3
Secretary	Orlando, Florida 32822

Chris Catalfo	5425 S. Semoran Blvd. Suite A3
Treasurer	Orlando, Florida 32822

ARTICLE VIII: INCORPORATORS

The names and addresses of the incorporators to these Articles of Incorporation are:

Chris Catalfo, 5425 S. Semoran Blvd. Suite A3, Orlando, Florida 32822

The undersigned has executed these Articles of Incorporation this 23 day of December, 1997.

<u>A) CUAPA</u> CHRIS CATALFO

STATE OF FLORIDA COUNTY OF Summer

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State of Florida and in County to take acknowledgements, personally appeared CHRIS CATALFO, which revealed identification in the form of his Florida driver's license and who executed the foregoing instrument and acknowledged before me that he executed the same voluntarily.

WITNESS my hand and official seal in the County and State last aforesaid this day of December, 1996.

Tarway, 1997

KELLY LYNN GUNNOE
MY COMMISSION # CC 418968
EXPIRES: November 8, 1998
Bonded Thru Notary Public Underwriters

Notary Public State of Florida

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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 Hoffner Family Chiropractic, IAC.
- 2. The name of the registered agent is Chris Catalfo.
- 3. The address of the registered agent/registered office is 5425 S. Semoran Boulevard, Suite A3, Orlando, Florida 32822.

ACCEPTANCE

Having been named as registered agent and designated to accept service of process for the above corporation, 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.

CHRIS CATALFO

97 JAN 27 AH II: OU SECRETARY OF STATE

STATE OF FLORIDA COUNTY OF Sminole

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State of Florida and County of to take acknowledgements, personally appeared CHRIS CATALFO, who revealed his identification in the form of his Florida driver's license and who executed the foregoing instrument and acknowledged before me that he executed the same voluntarily.

WITNESS my hand and official seal in the County and State last aforesaid this day of December, 1996.

January, 1997

KELLY LYNN GUNNOE
MY COMMISSION # CC 418966
EXPIRES: November 8, 1998
Bonded Thru Notary Public Underwriters

Notary Public State of Florida