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#### **ARTICLES OF INCORPORATION**

#### <u>OF</u>

# HEALTHY WAY COMMUNICATIONS, INC.

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:

Healthy Way Communications, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

1000 Ponce De Leon Boulevard Suite 117 Coral Gables, FL 33134

#### ARTICLE III CAPITAL STOCK

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 ADDRESS

The name and address of the initial registered agent is:

Alex P. Rosenthal, Esq.
Duker Barrett & Gravante
One East Broward Boulevard, Suite 620
Ft. Lauderdale, Florida 33301

## ARTICLE V INCORPORATOR(S)

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

Jeffrey Sack, M.D. 1000 Ponce De Leon Boulevard Suite 117 Coral Gables, FL 33134

The undersigned has(have) executed these Articles of Incorporation this day of April, 1997.

Jeffrey Sack, President

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#### **CERTIFICATE OF DESIGNATION**

#### 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:

Healthy Way Communications, Inc.

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

Alex P. Rosenthal, Esq. Duker Barrett & Gravante One East Broward Boulevard, Suite 620 Ft. Lauderdale, Florida 33301

SIGNATURE Jeffrey Sack

TITLE: President

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.

DATE 4897