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T CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 222-1092

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State

Zip

Phone

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*****70.00 *****70.00

CORPORATION(S) NAME

*Complete Wellness Independent Physician
Association, Inc.*

Profit Arts. of Inc.

☐ NonProfit

☐ Amendment

☐ Merge

☐ Limited Liability Co.

☐ Dissolution/Withdrawal

☐ Mark

☐ Foreign

☐ Limited Partnership

☐ Annual Report

☐ Other USC Filing

☐ Reinstatement

☐ Reservation

☐ Change of RA.

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CR2E031 (1-89)

RECEIVED
97 JUN -5 AM 11:21
DIVISION OF CORPORATION

STATE OF FLORIDA
ARTICLES OF INCORPORATION
OF

COMPLETE WELLNESS INDEPENDENT PHYSICIAN ASSOCIATION,

FIRST: THE CORPORATE NAME THAT SATISFIES THE REQUIREMENTS OF SECTION 607.0401 IS: COMPLETE WELLNESS INDEPENDENT PHYSICIAN ASSOCIATION, INC..

SECOND: THE STREET ADDRESS OF THE INITIAL PRINCIPAL OFFICE AND, IF DIFFERENT, THE MAILING ADDRESS OF THE CORPORATION IS: 507 SOUTH PAULA DRIVE, DUNEDIN, FLORIDA 34698.

THIRD: THE NUMBER OF SHARES THE CORPORATION IS AUTHORIZED TO ISSUE IS: ONE THOUSAND WITH NO PAR VALUE.

FOURTH: THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE OF THE CORPORATION IS 507 SOUTH PAULA DRIVE, DUNEDIN, FLORIDA 34698 AND THE NAME OF ITS INITIAL REGISTERED AGENT AT SUCH ADDRESS IS JASON PATCHEN.

FIFTH: THE NAME AND ADDRESS OF EACH INCORPORATOR IS:

Cherie Ortell	1633 Broadway, New York, New York 10019
Cheryl Hawker	1633 Broadway, New York, New York 10019
Tracey Konecnik	1633 Broadway, New York, New York 10019

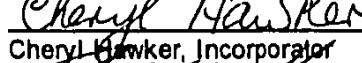
THE UNDERSIGNED (HAVE) EXECUTED THESE ARTICLES OF INCORPORATION

THIS 2nd DAY OF June, 1997.

SIGNATURE/TITLE



Cherie Ortell, Incorporator



Cheryl Hawker, Incorporator



Tracey Konecnik, Incorporator

ACCEPTANCE BY THE REGISTERED AGENT AS REQUIRED IN SECTION
607.050C1 (3) F.S.: JASON PATCHEN IS FAMILIAR WITH AND
ACCEPTS THE OBLIGATIONS PROVIDED FOR IN SECTION 607.0505.

DATED June 3rd

, 1997

BY Jason Patchen

JASON PATCHEN
NAME OF OFFICER

President
TITLE OF OFFICER

FILED
97 JUN -5 PM 4:19
SECRETARY OF STATE
TALLAHASSEE FLORIDA