P970222087311

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

SUBJECT:	BEST HEALTH	I, INCORPORATI		_
		2	20000281! -10/09/97- ****131.29	-01051003
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 CO	PY REQUIRED	
FROM: _	ROM: DONALD E. FUNK Name (Printed or typed)			
_	2833 S. PONTE	<u> </u>		
	A	ddress		
PONTE VEDRA: BEACH, FL, 32082 City, State & Zip ACC 14				
				97 0
-	904-727-6023 Daytime Telephone number			FILI
			EË, FLORIDA	-9 PH 1: 48

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

n 10/9/97

ARTICLES OF INCORPORATION

FILED

97 OCT -9 PM 1: 48

SECHETAINT OF STATE TALLAHASSEE, FLORIDA

The undersigned incorporator, 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:

BEST HEALTH, IN CORPORATED

ARTICLE II PRINCIPAL OFFICE

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

CRAIG AIRPORT, 855-3 ST. JOHNS BLUFF ROAD JACKSONVILLE, FL. 32225

ARTICLE III SHARES

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

1,000 (ONE THUVSAND)

<u>ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS</u>

The name and Florida street address of the initial registered agent are:

DONALD E. FUNK 2833 S. PONTE UEDRA BLVD. PONTE VEDRA BEACH, FL. 32082

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

DONALD E. FUNK 2833 S. PONTE VEDRA BLVD. PONTE VEDRA BEACH, FL. 32082

/ Signature/Incorporator

10/7/97

Date

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

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.

/Signature/Registered Agent

Date