

P97000093822

SOUTH FLORIDA FAMILY CHIROPRACTIC CENTERS, INC.

3900 N. W. 79th Avenue
Suite #100
Miami, Florida 33166

October 29, 1997

100002337931--5
-11/04/97--01076--002
*****70.00 *****70.00

Divisions of Corporations
c/o John Nedeau
409 East Gaines Street
Tallahassee, Florida 32399

Re: South Florida Family Chiropractic Centers, Inc.

Dear Mr. Nedeau:

Enclosed please find two copies of executed Articles of Incorporation for South Florida Family Chiropractic Centers, Inc.

In addition, please find check in the amount of \$70.00 which represents the filing fee and registered agent designation.

Thank you in advance for the processing of these documents.

Sincerely,



Dr. Joseph M. Buckley
Incorporator

Enclosure

JB/

FILED
97 NOV -3 AM 9:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/11/97

ARTICLES OF INCORPORATION

OF

SOUTH FLORIDA FAMILY CHIROPRACTIC CENTERS, INC.

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, do hereby adopt the following articles of incorporation:

**ARTICLE ONE
NAME**

The name of the corporation is South Florida Family Chiropractic Centers, Inc.

**ARTICLE TWO
CORPORATE DURATION**

The duration of the corporation is to be perpetual.

**ARTICLE THREE
PURPOSE**

The corporation may engage in any activity or business permitted under the laws of the State of Florida.

**ARTICLE FOUR
CAPITALIZATION**

The aggregate number of shares which the corporation is authorized to issue is 10,000 shares. Such shares shall be of a single class, and shall have a par value of One Dollar (\$1.00) per share.

**ARTICLE FIVE
PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be 3900 N. W. 79th Avenue, Suite #100, Miami, Florida 33166.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLE SIX
REGISTERED OFFICE AND AGENT**

The street address of the initial registered office of the corporation is, 3900 N. W. 79th Avenue, Suite #100, Miami, Florida 33166, and the name of its initial registered agent at such address, is Dr. Joseph M. Buckley.

**ARTICLE SEVEN
DIRECTORS**

The number of directors constituting the initial board of directors of the corporation shall be not less than two (2). The name and address of each person who is to serve as a member of the initial board of directors is:

| <u>Name</u> | <u>Address</u> |
|-----------------------|--------------------------------------------------------------------------|
| Dr. Joseph M. Buckley | 3900 N. W. 79 th Avenue Suite #100 Miami, Florida 33166 |
| Dr. Damian Martinez | 3900 N. W. 79 th Avenue Suite #100 Miami, Florida 33166 |

**RTICLE EIGHT
INCORPORATORS**

The name and address of each incorporator is:

| <u>Name</u> | <u>Address</u> |
|-----------------------|--------------------------------------------------------------------------|
| Dr. Joseph M. Buckley | 3900 N. W. 79 th Avenue Suite #100 Miami, Florida 33166 |
| Dr. Damian Martinez | 3900 N. W. 79 th Avenue Suite #100 Miami, Florida 33166 |

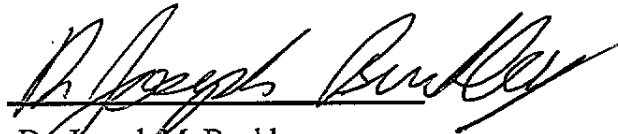
**ARTICLE NINE
INDEMNIFICATION**

This corporation shall indemnify and may insure its officers and directors to the fullest extent permitted by law.

**ARTICLE TEN
AMENDMENTS**

These articles of incorporation may be amended in the manner authorized by at the time of amendment.

IN WITNESS WHERETO, I, DR. JOSEPH M. BUCKLEY, being the incorporator of this corporation, make and file these articles of incorporation this 29th day of October, 1997.


Dr. Joseph M. Buckley

**CERTIFICATE DESIGNATING PLACE OF BUSINESS FOR DOMICILE FOR
THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT
UPON WHOM PROCESS MAY BE SERVED**

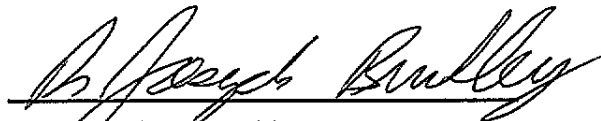
IN COMPLIANCE WITH SECTION 607.0502, FLORIDA STATUTES, THE
FOLLOWING IS SUBMITTED:

THAT **SOUTH FLORIDA FAMILY CHIROPRACTIC CENTERS INC.**,
DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF
FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT:

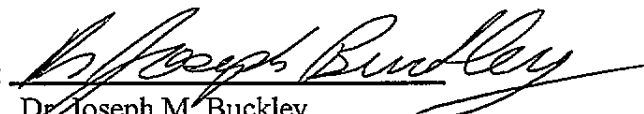
3900 N. W. 79th Avenue
Suite #100
Miami, Florida 33166

HAS NAMED DR. JOSEPH M. BUCKLEY, LOCATED AT, 3900 N. W. 79th
Avenue, Suite #100, Miami, Florida 33166 AS ITS AGENT TO ACCEPT SERVICE OF
PROCESS WITHIN FLORIDA.

FILED
97 NOV -3 AM 9:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA


Dr. Joseph M. Buckley, Incorporator

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE
ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THE
CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND FURTHER
AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE
TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

By: 
Dr. Joseph M. Buckley