P980000 17496

January 27, 1998

Department of State, Division of Corporations Post Office Box 6327 Tallahassee, FL 32314 600002437876--6 -02/23/38--01088--025 *****70.00 ******70.00

600002437876--6 -02/23/38--01088--026 ******52.50 ******52.50

Re: THE FLORIDA LIFE CENTER FOR HEALING INC.

Ladies and Gentlemen:

つク

Please find enclosed for filing one original and one copy of the Articles of Incorporation of The Florida Life Center for Healing Inc. Also enclosed is a check in the amount of \$70.00 as the appropriate filing fee.

Please return the copy, stamped to show the date of filing, to the undersigned.

Sincerely,

Linda Golub

620 E. 5TH Ave., Mount Dora, FL 32757

98 FEB 23: AM 8: 20
SLOWETARY OF STATE
SLOWETARY OF STATE

F. CHESSER FEB 2 4 1998

ARTICLES OF INCORPORATION

OF

THE FLORIDA LIFE CENTER FOR HEALING INC.

ARTICLE I

The name of the Corporation is The Florida Life Center for Healing Inc.

ARTICLE II

The principal place of business and mailing address of this corporation shall be 620 E. 5TH Ave., Mount Dora, FL 32757.

ARTICLE III

The aggregate number of shares which the Corporation has authority to issue is 1,000 shares of common stock with no par value.

ARTICLE IV

The address of the initial registered office of the Corporation is 620 E. 5TH Ave., Mount Dora, Florida 32757, and the name of the Corporation's initial registered agent for service of process at such address is Linda Golub.

ARTICLE V

The name and address of the incorporator to these Articles of Incorporation is: Linda Golub, 620 E. 5TH Ave., Mount Dora, FL 32757.

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: The Florida Life Center for Healing Inc.
- 2. The name of the registered agent and office is:

Linda Golub 620 E. 5TH Ave., Mount Dora, Florida 32757

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.

SIGNATI ÎRE

DATE

FILED