# 0980 ANSOTA ZETTED ZO

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

000002454220--1 -03/11/98--01102--015 \*\*\*\*122.50 \*\*\*\*122.50

SUBJECT: SOUTHEASTERN MEDICAL AND CHIROPRACTIC CENTER, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original	and one(1) copy of the artic	les of incorporation and a	check for	-
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate	₩\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL COPY REQUIRED		
FROM:	3475 N CO	ANDESHAN rinted or typed)  UNTRY CLUB Address		
	AVENTURA, City, S (305) 469-	FC 33/80 State & Zip	TALLAHASSEE,	98

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

O Notes

#### ARTICLES OF INCORPORATION

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:

SOUTHEASTERN MEDICAL AND CHIROPRACTIC CENTER, INC

## ARTICLE II PRINCIPAL OFFICE

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

3475 N COUNTRY CLUB DRIVE, SUITE 109 AVENTURA, FL 33180

#### ARTICLE III SHARES

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

100 SHARES COMMON

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

SERGEY LANDES MAN

3475 N COUNTRY CLUB DRIVE, SUITE 109

ARTICLE V INCORPORATOR 33180

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

SERGEY LANDESHAN

3475 N COUNTRY CLUB ORIVE, SUITE 109

AVENTURA, FL 33180

Signature/Incorporator

3/9/98

Dote

(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

3/9/98

ate