Pasooos 3998 TRANSMITTAL LETTER

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

800002651008--3 -09/29/98--01019--015 *****70.00 *****70.00

SUBJECT:	Brown	Chiroprac	tic Cer
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(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

\$70.00

\$78.75

\$122.50

\$131.25

Filing Fee

Filing Fee

Filing Fee

Filing Fee,

& Certificate

& Certified Copy

Certified Copy

& Certificate

FROM:

John Brown

Name (Printed or typed)

2609 West 23rd St.

Address

Panama City, Florida

City, State & Zip

850-769-3777

Daytime Telephone number

98 SEP 29 PM 2

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

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.

NAME ARTICLE I

The name of the corporation shall be:

Brown's Chiropractic Center, Inc.

PRINCIPAL OFFICE ARTICLE II

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

Business Address 2609 West 23rd St. Panama City, Florida Mailing Address 2609 West 23rd St.

Panama City, Florida

32405

32405

ARTICLE III SHARES

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

One Thousand (1,000) time is:

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

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

John Brown 2609 West 23rd St. Panama City, Florida 32405

INCORPORATOR ARTICLE V

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

John Brown 2609 West 23rd St. Panama City, Florida 32405

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.

folmh, Bround
Signature/Registered Agent

<u>Q - 28-98</u>

John Brown 2609 West 23rd St. Panama City, Florida 32405

> 98 SEP 29 PM 2: 58 SECRETARY OF STATE