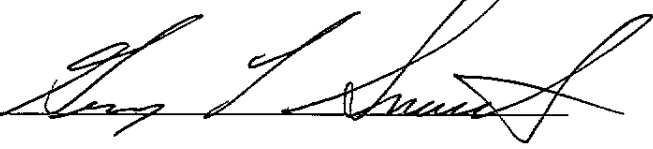


P99000038072

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

SUBJECT: Feel Better, Inc

I enclose an original and 1 copy of the Articles of Incorporation for the above corporation and a check in the amount of \$122.50.

SIGNED: 

From:
George L Smith

Name
1204 Sandy St

Address
Port Charlotte, FL 33952

City State Zip
941-629-7696

Telephone Number

800002849788-13
-04/23/99-01087-013
****122.50 *****78.75

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99 APR 23 PM 1:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BROCK APR 27 1999

ARTICLES OF INCORPORATION
OF
Feel Better, Inc.

ARTICLE I NAME

The name of the corporation shall be: Feel Better, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
1204 Sandy St.
Port Charlotte, FL 33952

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

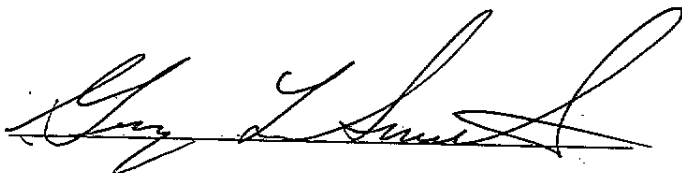
ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:
George L. Smith
1204 Sandy St
Port Charlotte, FL 33952

ARTICLE V INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:
George L Smith
1204 Sandy St
Port Charlotte, FL 33952

The undersigned has executed these Articles of Incorporation this 21 day of APRIL 1999.


,Incorporator

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TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, 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:

Feel Better, Inc

2. The name and address of the registered agent and office is:

George L Smith
1204 Sandy St
Port Charlotte, FL 33952

Signature: _____

Title: _____

Date: 4/21/99

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: _____

Date: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA