P99000054029

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

SUBJECT: "Intelli-Choice", Inc. (Proposed corporate name - must include suffix)					
Enclosed is an originate	al and one(1) copy of the article	4	· 00002907 -06/17/99(*****70.00	01084006	
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:	1811 Englewood Ro A Englewood, FL 34 City, S (941)356-5562	inted or typed) d., Suite #181 ddress 4223 State & Zip	99 JUN 15 AM 51 24	SECRETARY OF STATE DIVISION OF CORPOREATIONS	
	Daytime Te	lephone number	JUN 1 5 1999.		

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

ARTICLES	OF	INCORPORATION
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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:

"Intelli-Choice", Inc.

ARTICLE II PRINCIPAL OFFICE

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

18]] Englewood Rd., Suite #18] Englewood, Fl 34223

SHARES ARTICLE III

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

1000

INITIAL REGISTERED AGENT AND STREE

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

Dr. Dana Stevens 327 Whispering Oaks Ct. Sarasota, FL 34236

INCORPORATOR ARTICLE V

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

Dr. Dana Stevens 327 Whispering Oaks Ct. Sarasota, FL 34236

Signature/Incorporator

(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