TRANSMITTAL LETTER

P9900062202

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

SUBJECT:	BROCK HEALTH & FITNESSCONSULTARTS, INC. (Proposed corporate name - must include suffix)						
	(Proposed corpor		-~/ D0002923 -07/06/990 *****78.75	7043)1102011 *****78.75			
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:							
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL COI	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED				
FROM:	Derek Brock, PT-A	rc	t				
PROM.	Name (Printed or typed)						
	3050_SE 31st Str						
	Ocala, Florida 34471 City, State & Zip			. 99 J			
	352 - 694-9249 Daytime Te	elephone number	AHASSEE, FLORIDA	FILED JUL -6 PH 2: 39			

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

T57/13/99

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Flori	da
Business Corporation Act, hereby adopts the following Articles of Incorporation.	

AR1	ICLE	I	NAME

The name of the corporation shall be:

BROCK HEALTH & FITNESS CONSULTANTS, INC.

PRINCIPAL OFFICE ARTICLE II

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

#82 _____ 1549 Sandpiper Street

34102 Naples, Florida

ARTICLE III SHARES

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

35

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

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

Derek Brock, PT-ATC

3050 SE 31st Street

Ocala, Florida 34471 FNCORPORATOR ARTICLE V

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

Derek Brock, PT-ATC 3050 SE 31st Street Ocala, Florida 34471

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