P94000009253

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

E00002944646—9 -07/29/99—01014—010 *****78.75 *****78.75

SUBJECT:

Nutrimind, Inc.

Enclosed please find an original and one (1) copy of the articles of incorporation and a check in the amount of \$78.75.

FROM:

Amy H. Taylor, CPA

5185 Castello Drive, Suite 2

Naples, FL 34103 (941) 261-1040

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SECRETARY OF STATE
TALL ANASSEF FLORIDA

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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:

Nutrimind, Inc.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business of this corporation shall be:

800 Goodlette Road North, Suite 270 Naples, FL 34102

The mailing address of this corporation shall be:

P.O. Box 413005, Suite 101 Naples, FL 34101

ARTICLE III - SHARES

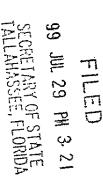
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000,000 shares

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

David Perlmutter, M.D. 800 Goodlette Road North, Suite 270 Naples, FL 34102



ARTICLE V - INITIAL OFFICERS

The names and addresses of the initial officers are:

David Perlmutter, M.D., President 800 Goodlette Road North, Suite 270 Naples, FL 34102

Larry S. Little, Senior Vice-President P.O. Box 413005, Suite 101 Naples, FL 34101

ARTICLE VI - INCORPORATOR

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

David Perlmutter, M.D. 800 Goodlette Road North, Suite 270 Naples, FL 34102

The undersigned	incorporator has	executed the	se Articles	of
Incorporation this 19 99.	s	day of	July	
19 49 .	•		$\overline{}$	

Signature

CERTIFICATE OF DESIGNATION OF

REGISTERED AGENT / REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, 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:

Nutrimind, Inc.

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

David Perlmutter, M.D. 800 Goodlette Road North, Suite 270 Naples, FL 34102

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.

Dil Per Bom

7/13/99

99 JUL 29 PN 3 21
SEGRETARY OF STATE
TAIL AMASSEE FLORING