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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 922-4001

From:

Account Name : WARD, DAMON & POSNER, P.A.  
Account Number : 072262000447  
Phone : (561) 842-3000  
Fax Number : (561) 842-3626

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT CORPORATION OR P.A.

HealingExpress.Com, Inc.

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**ARTICLES OF INCORPORATION OF  
HEALINGEXPRESS.COM, INC.**

**THE UNDERSIGNED**, acting as incorporator of a Corporation under the Florida Business Corporation Act, adopts the following Articles of Incorporation for such Corporation.

**ARTICLE I - NAME**

The name of this Corporation is: **HealingExpress.Com, Inc.**

**ARTICLE II - DURATION**

The duration of this Corporation is perpetual.

**ARTICLE III - PURPOSE**

The purpose for which this Corporation is organized is to engage in any lawful act or activities for which corporations may be organized under the laws of the State of Florida.

**ARTICLE IV - MAILING ADDRESS OF CORPORATION**

The mailing address of the business is 4176 Burns Road, Palm Beach Gardens, Florida 33410 and the principal place of business of this Corporation is 4176 Burns Road, Palm Beach Gardens, Florida 33410.

**ARTICLE V - STOCK**

The aggregate number of shares which this Corporation shall have authority to issue is 10,000 shares of common voting stock.

Prepared by: **Michael J Posner, Esq.**  
4420 Beacon Circle, Suite 100  
West Palm Beach, Florida 33407  
Bar No: 525685  
561/842-3626

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**ARTICLE VI - INITIAL REGISTERED OFFICE AND REGISTERED AGENT**


The street address of this Corporation's initial registered office in Florida is 4420 Beacon Circle, Suite 100, West Palm Beach, Florida 33407 and the name of its initial registered agent at that address is Philip H. Ward, III, Esq.

**ARTICLE VIII - INCORPORATOR**

The name and address of the incorporator is:

<u>Name</u>	<u>Address</u>
Michael J Posner	4420 Beacon Circle Suite 100 West Palm Beach, Florida 33407

DATED this 1st day of October, 1999.

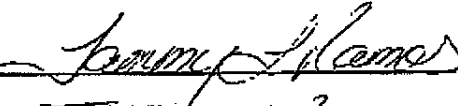
  
\_\_\_\_\_  
Michael J Posner  
(Incorporator)

STATE OF FLORIDA            )  
COUNTY OF PALM BEACH    )

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared Michael J Posner, to me known to be the person described in and who executed the foregoing instrument and acknowledged before me that he executed the same for the purposes therein expressed. WITNESS my hand and official seal in the County and State last aforesaid this 1st day of October, 1999.

Notary Public State of Florida at Large

My Commission Expires:

Sign:   
Print: TAMMY L. RAMOS

Prepared by: Michael J Posner, Esq.  
4420 Beacon Circle, Suite 100  
West Palm Beach, Florida 33407  
Bar No: 525685  
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**CERTIFICATE DESIGNATING PLACE OF  
BUSINESS OR DOMICILE FOR THE SERVICE  
OF PROCESS WITHIN THIS STATE NAMING  
AGENT UPON WHOM PROCESS MAY BE SERVED**

**ACKNOWLEDGMENT:**

Having been named to accept service of process for **HEALINGEXPRESS.COM, INC.**, at the initial registered office of the Corporation in this State designated in its Articles of Incorporation, I hereby accept to act in this capacity and agree to comply with the provisions of Section 607.0505 Florida Statutes.

Date: October 1, 1999.

  
Philip H. Ward, III

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STATE OF FLORIDA  
TALLAHASSEE

**Prepared by: Michael J Posner, Esq.**  
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