## TRANSMITTAL LETTER

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

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Enclosed is an origin	nal and one(1) copy of the article	s of incorporation and a	check for: 으로	7
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□ \$70.00	<b>2</b> \$78.75	□\$78.75	\$87.50	
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NOTE: Please provide the original and one copy of the articles.

s. w22935





## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 28, 1999

MICHAEL JOHNSON 650 NE 126 STREET MIAMI, FL 33131

SUBJECT: THE LINK CENTER FOR ALTERNATIVE WELLNESS OF NORTH

MIAMI エルエ

Ref. Number: W99000022299

We have received your document for THE LINK CENTER FOR ALTERNATIVE WELLNESS OF NORTH MIAMI and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6904.

Freida Chesser Corporate Specialist

Letter Number: 199A00047182

link the Center For Alternative Wellness Of North miami INC

<b>k</b>			
ARTICLES OF INCORPORATION			
The undersigned incorporator, for the purpose of forizing a consumer of the purpose of forizing a consumer of the surpose of	es of Incorporation.		
ARTICLE I NAME The name of the corporation shall be: Link Lis	enter For Attentives Weltness orth miami INC		
ARTICLE II PRINCIPAL OFFICE LINE The principal place of business and mailing address of the	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
ARTICLE III SHARES  The number of shares of stock that this corporation is aut  \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	horized to have outstanding at any one fine is:		
ARTICLE IV INITIAL REGISTERED AGE The name and Florida street address of the initial register	ed agent are:		
Frank Jack Adler	red agent are:  Bay Har ber Isl  Florida  33154		
ARTICLE V INCORPORATOR  The name and address of the incorporator to these Articles	cles of Incorporation are Link This Center For		
MICHAEL JOHNSON	Alteratives Wellness IV.C. COO NE 126 St NOGH Miami Fla 33161		
Wilattohnon	9/20/29 Posts		
l Signature/Incorporator	Date		
-			

(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

Tack Aller

1271 94 The Street

Mani, Floricki 33154