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Florida Department of State

Division of Corporations

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Katherine Harris, Secretary of State

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To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
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Phone : (305) 541-3694
Fax Number : (305) 541-3770

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT CORPORATION OR P.A.

WEST ALTERNATIVE MEDICINE, INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
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ARTICLES OF INCORPORATION

OF

WEST ALTERNATIVE MEDICINE, INC.

THE UNDERSIGNED, acting as an incorporator of a corporation under the Florida General Corporation Act, adopts the following Articles of Incorporation for such corporation:

ARTICLE I

The name of the Corporation shall be:

WEST ALTERNATIVE MEDICINE, INC.

ARTICLE II

This corporation shall have perpetual existence, and its corporate existence shall commence at the time of the filing of the Articles of Incorporation by the Department of State.

ARTICLE III

The corporation shall engage in any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV

The aggregate number of shares which this corporation shall have authority to issue is ONE HUNDRED (100) SHARES with a par value of FIVE AND NO/100 (\$5.00) DOLLARS each share.

MARCO DE LA CAL, ESQUIRE
Florida Bar No. 314587
999 Ponce de Leon Boulevard
Suite 720
Coral Gables, FL 33134
Ph: (305) 444-3800

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TALLAHASSEE, FLORIDA

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ARTICLE V

The street address of this corporation's initial registered office is:

1490 West 49th Place
Suite 390
Hialeah, Florida 33012

and the name of its initial Registered Agent at such address is:

CELESTINO LOPEZ

ARTICLE VI

The number of directors constituting the initial Board of Directors shall be one (1) and the name and address of the person who is to serve as member thereof are as follows:

CELESTINO LOPEZ
1490 West 49th Place
Suite 390
Hialeah, Florida 33012

ARTICLE VII

The principal office and/or mailing address of the Corporation is as follows:

1490 West 49th Place
Suite 390
Hialeah, Florida 33012

ARTICLE VIII

The name and address of this corporation's incorporator are as follows:

CELESTINO LOPEZ
1490 West 49th Place
Suite 390
Hialeah, Florida 33012

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ARTICLE IX

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders and approved at a stockholder's meeting by a majority of the stockholders entitled to vote thereon.

IN WITNESS WHEREOF, the undersigned have made, subscribed and acknowledged these Articles of Incorporation this 19th day of October, 1999.



CELESTINO LOPEZ

STATE OF FLORIDA)
) S.S.
COUNTY OF MIAMI-DADE)

WE HEREBY CERTIFY that on this day personally appeared before me, the undersigned authority, CELESTINO LOPEZ, well known to be the person described in the foregoing Articles of Incorporation of WEST ALTERNATIVE MEDICINE, INC., and executed the same freely and voluntarily for the purposes therein expressed.

WITNESS our hands and official seals in Miami, Miami-Dade County, Florida, on this 19th day of October, 1999.



Marco De la Cal
MY COMMISSION # CC835622 EXPIRES
July 1, 2003
BONDED THRU TROY FARM INSURANCE INC



NOTARY PUBLIC
State of Florida at Large

My Commission Expires:

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RESIDENT AGENT CERTIFICATE

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted in compliance with said Act:

That WEST ALTERNATIVE MEDICINE, INC., desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Incorporation, in Miami, Miami-Dade County, Florida, has named CELESTINO LOPEZ, of 1490 West 49th Place, Suite 390, Hialeah, Florida 33012, as its agent to accept service of process within this state.


 CELESTINO LOPEZ
ACKNOWLEDGEMENT

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to keeping open said office.


 CELESTINO LOPEZ

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