

PA2000051597  
FILED

TRANSMITTAL LETTER

02 MAY -6 PM 5:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

400005462584--9  
-05/06/02--01070--015  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: MEND, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: Andres Luis Sosa  
Name (Printed or typed)

13220 SW 67 ST  
Address

Miami FL 33183  
City, State & Zip

305-975-2243  
Daytime Telephone number

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

CBS-9

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**FILED**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**  
MEND, INC.

**ARTICLE II PRINCIPAL OFFICE**  
13220 SW 67 STREET  
MIAMI, FL 33183

**ARTICLE III PURPOSE**  
TO PROVIDE PHYSICAL THERAPY REHABILITATIVE SERVICES

**ARTICLE IV SHARES**  
100 SHARES

**ARTICLE V INITIAL OFFICERS/DIRECTORS**  
ANDRES LUIS SASSO (PRESIDENT)  
13220 SW 67 STREET  
MIAMI, FL 33183


**ARTICLE VI REGISTERED AGENT**  
ANDRES LUIS SASSO  
13220 SW 67 STREET  
MIAMI, FL 33183

**ARTICLE VII INCORPORATOR**  
ANDRES LUIS SASSO  
13220 SW 67 STREET  
MIAMI, FL 33183

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
\_\_\_\_\_  
Signature/Registered Agent

5/3/02  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

5/3/02  
\_\_\_\_\_  
Date