

PO2000101927

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EXPRESS CORPORATE FILING SERVICE INC.
(Requestor's Name)
1000 PONCE DE LEON BLVD. STE: 101
(Address)
CORAL GABLES, FL 33134 305-444-4994
(City, State, Zip) (Phone #)

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RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 SEP 20 PM 12:52
02 SEP 20 PM 12:29

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. JPL REHABILITATION CENTER, INC. (Corporation Name) (Document #)
2. (Corporation Name) (Document #)
3. (Corporation Name) (Document #)
4. (Corporation Name) (Document #)

- ☐ Walk in ☒ Pick up time ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
☒	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

100007898581--8
-09/20/02--01063--008
*****78.75 *****78.75

SEP 20 2002

Examiner's Initials

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

JPL REHABILITATION CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

348 N.W. 27 AVE.
MIAMI, FL 33125

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THERAPY, REHABILITATION AND MEDICAL OFFICE.

ARTICLE IV SHARES

The number of shares of stock is:

500 SHARES TO \$1.00 EACH (FIVE HUNDRED DOLLARS)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

JAVIER PEREZ
6265 WEST 22 COURT APT. #102
HIALEAH, FLORIDA 33016

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

JAVIER PEREZ
348 N.W. 27 AVE.
MIAMI, FLORIDA 33125

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAVIER PEREZ
348 N.W. 27 AVE.
MIAMI, FLORIDA 33125

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

X

Signature/Registered Agent

Date

X

Signature/Incorporator

Date

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