

Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION

Spieth Occupational Therapy Inc.

Certificate of Status	1
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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Spieth Occupational Therapy Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

Spieth Occupational Therapy Inc.

4520 16th Street NE

Naples, FL 34120

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Erica L. Spieth

4520 16th Street NE

Naples, FL 34120

Prepared By:

Bruce B. Hubbard

77 East John St.

Hicksville, New York 11801

1-516-635-3940

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ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Erica L. Spieth - 4520 16th Street NE, Naples, FL 34120 - President/Director
Guy A. Spieth - 4520 16th Street NE, Naples, FL 34120 - Treasurer/Director

ARTICLES VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Erica L. Spieth - 4520 16th Street NE, Naples, FL 34120
Guy A. Spieth - 4520 16th Street NE, Naples, FL 34120

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

24th day of August 2009


Erica L. Spieth - Signature


Guy A. Spieth - Signature

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **Spieth Occupational Therapy Inc.**

2. The name and address of the registered agent and office is:

Erica L. Spieth
Name
4520 16th Street NE
(P.O. Box or Mail Drop Box NOT Acceptable)
Naples, FL 34120
(City / State / Zip)

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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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Erica L. Spieth
Erica L. Spieth
SIGNATURE

August 24, 2009
(Date)

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