

PO4000154769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600042624776

11/12/04--01076--012 **78.75

RECEIVED
04 NOV 12 PM 2:10
STATE
DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA

FILED
04 NOV 12 AM 10:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

js
11-15

OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

OFFICE USE ONLY

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

1. T & R REHAB INC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

04 NOV 12 AM 10:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Examiner's Initials

ARTICLES OF INCORPORATION

T & R REHAB INC

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:

T & R REHAB INC

ARTICLE II - PRINCIPAL OFFICE

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

932 West 79 PL
Hialeah Fl 33014

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 NOV 12 AM 10:39

FILED

ARTICLE III - SHARES

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

SIX HOUNDRRED (600) SHARES OF \$1.00 PAR VALUE COMMON STOCK,
WHICH SHALL BE DESIGNATED "COMMON STOCK"

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

RUTH REVERON
932 West 79 Pl
Hialeah Fl 33014

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

RUTH REVERON 932 West 79 PL
Hialeah Fl 33014

The undersigned incorporator has executed these Articles of Incorporation this 11TH day of November 2004


Signature

FILED
04 NOV 12 AM 10:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI- DIRECTOR(S)

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

RUTH REVERON 932 West 79 PL
Hialeah Fl 33014
President/Secretary
Treasure

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.


Registered Agent Signature