

GARRY R. SPEAR, P.A.
ATTORNEY AT LAW

A9500000109

FILED
95 JUL 17 PH 3:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 1, 1995

Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

000001507650
-06/07/95--01086--005
*****87.50 *****87.50

Re: Certificate and Affidavit of Limited Partnership - Women's Institute of Incorporation Therapy, Ltd.

Dear Sir or Madam:

Please file the enclosed Certificate and Affidavit of Limited Partnership for Women's Institute of Incorporation Therapy, Ltd. The combined filing and registered agent fee of \$87.50 is enclosed with the application.

Thank you for your assistance in this matter.

Sincerely,



Garry R. Spear
Attorney at Law

Enclosure
cc: file

W950000011885

Name Availability	KWM
Document Examiner	KWM
Updater	KWM
Updater Verifier	KWM
Acknowledgement	KWM
W. P. Verifier	KWM

7-17

GARRY R. SPEAR
ATTORNEY AT LAW
9660 W. Sample Road
Third Floor
Coral Springs, Florida 33065
(305) 755-9000 (305) 755-4617

VIA FEDERAL EXPRESS

July 14, 1995

Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

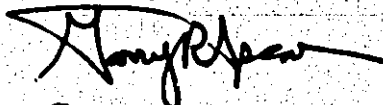
Re: Re-Filing of Certificate and Affidavit of Limited Partnership - Women's Institute of
Incorporation Therapy, Ltd.

Dear Sir or Madam:

Please re-file the enclosed Certificate and Affidavit of Limited Partnership for Women's Institute
of Incorporation Therapy, Ltd. The filing fee of \$52.00, and the designation of registered agent
fee of \$35.00 has been retained by you office. All requested changes have been made in the
document.

Thank you for your assistance in this matter.

Sincerely,



Garry R. Spear
Attorney at Law

Enclosure
cc: file



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

June 12, 1995

GARRY R. SPEAR
9660 W. SAMPLE RD.
CORAL SPRINGS, FL 33065

SUBJECT: WOMEN'S INSTITUTE OF INCORPORATION THERAPY, LTD.
Ref. Number: W95000011885

We have received your document for **WOMEN'S INSTITUTE OF INCORPORATION THERAPY, LTD.** and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 620.108, Florida Statutes, requires the affidavit include the amount of capital contributions of the limited partners and the amount anticipated to be contributed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6967.

Kenny Manning
Corporate Specialist

Letter Number: 195A00028687

CERTIFICATE AND AFFIDAVIT OF LIMITED PARTNERSHIP

OF

WOMEN'S INSTITUTE OF INCORPORATION THERAPY, LTD.

FILED

95 JUL 17 PM 3:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THIS CERTIFICATE OF LIMITED PARTNERSHIP, dated July 14, 1995, has been executed and is filed pursuant to Section 620.108 of the Florida Revised Limited Partnership Act (the "Act") to form a limited partnership under the Act.

1. **Name.** The name of the limited partnership is **WOMEN'S INSTITUTE OF INCORPORATION THERAPY, LTD.**

2. **Registered Office: Registered Agent.** The address of the registered office and the name and address of the registered agent for service of process is:

Women's Institute of Incorporation Therapy, Inc.
9660 W. Sample Road
Third Floor
Coral Springs, Florida 33065

3. **Mailing Address and Principal Office.** The mailing address for the limited partnership and the address of the principal office in the United States where records are to be kept or made available is:

9660 W. Sample Road
Third Floor
Coral Springs, Florida 33065

4. **General Partner.** The names, the mailing addresses, and the street addresses of the business of the general partner is:

Women's Institute of Incorporation Therapy, Inc. - P95000036618
9660 W. Sample Road
Third Floor
Coral Springs, Florida 33065

5. **Partnership Term.** The latest date upon which the limited partnership is to exist is December 31, 2044, unless sooner dissolved by written consent.

6. **Initial and Anticipated Capital Contributions.** The initial capital contributions and anticipated capital contributions of the limited partners shall aggregate \$100.00.

EXECUTED on the date written first above.

Witnesses:

Eric M. Casarano
James R. [Signature]

GENERAL PARTNER:

Douglas A. Miller
President

**Women's Institute of Incorporation Therapy, Inc.
General Partner**

STATE OF FLORIDA

COUNTY OF BROWARD

SUBSCRIBED AND SWORN TO before me by Douglas A. Miller, as President of Women's Institute of Incorporation Therapy, Inc., as general partner, this 14 day of July, 1995. He is personally known to me or has produced a Florida driver's license as identification and did take an oath.

Gloria H. Carranza

Notary Public
State of Florida

My commission expires:



GLORIA H. CARRANZA
COMMISSION # CC 471353
EXPIRES JUN 30, 1999
BONDED THRU
ATLANTIC BONDING CO., INC.

**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE
FOR THE SERVICE OF PROCESS WITHIN THIS STATE,
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED**

Pursuant to Section 620.105(2), Florida Statutes, the following is submitted, in compliance with said Section:

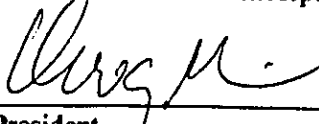
That WOMEN'S INSTITUTE OF INCORPORATION THERAPY, LTD., desiring to organize under the laws of the State of Florida, has named Women's Institute of Incorporation Therapy, Inc., located at 9660 W. Sample Road, Third Floor, Coral Springs, Florida 33065, as its agent to accept services of process within this state.

ACKNOWLEDGEMENT:

Having been named to accept service of process for the above stated Limited Partnership, at the place designated in this certificate, Women's Institute of Incorporation Therapy, Inc., hereby agrees to act in this capacity, and agrees to comply with the provisions said Act relative to keeping open said office.

Dated this 14th day of July, 1995

Women's Institute of Incorporation Therapy, Inc.



President