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(Address)

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(City/State/Zip/Phone #)

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Julie Kline _____ GAVE
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FILED
09 APR 24 PM 3:09
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

B. McKnight APR 27 2009

MORELLA &
ASSOCIATES
ATTORNEYS AT LAW
A PROFESSIONAL CORPORATION

JEFFREY J. MORELLA*
JULIE I. KLINE
KENNETH A. RISNER
ALAN E. GECH
KEVIN E. ISRAEL
JAMES E. DEASY
SCOTT A. KASER*
JOSEPH R. CARNICELLA*
PETER A. SPANGLER
CHRISTOPHER A. REINARD

Of Counsel
ROBERT A. KREBST
SHERRY W. MURRAY

April 23, 2009

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Via Overnight Courier

Re: Associates in Rehabilitation Management, Inc. (the "Company")

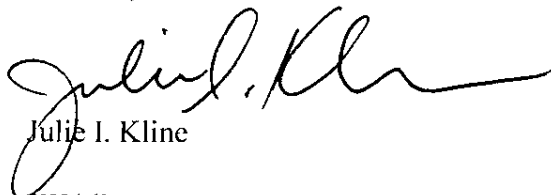
Dear Sir/Madam:

Enclosed please find an original and one (1) copy of the Application by Foreign Corporation for Authorization to Transact Business in Florida (the "Application") for the Company, along with a check in the amount of \$87.50 for the required filing fee. I have also enclosed an original Certificate of Good Standing from the Pennsylvania Department of State for the Company. The enclosed Application and Certificate of Good Standing are necessary for the Company, a Pennsylvania corporation, to be registered to do business in Florida.

Should the enclosed be acceptable to you, please file the original Application on behalf of the Company. Also, please date stamp the copy of the Application and return the same to me in the enclosed self-addressed stamped envelope.

Thank you for your assistance in this matter. Should you have any questions, please call.

Sincerely,



Julie I. Kline

JIK/slk

Enclosures

cc: Associates in Rehabilitation Management, Inc. (w/enclosures)
Richard J. Alfera, CPA (w/enclosures)

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Associates in Rehabilitation Management, Inc.

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Julie I. Kline, Esquire

(Name of Person)

Morella & Associates, A Professional Corporation

(Firm/Company)

706 Rochester Road

(Address)

Pittsburgh, Pennsylvania 15237

(City/State and Zip code)

For further information concerning this matter, please call:

Julie I. Kline

(Name of Person)

at (412) 369-9696

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Associates in Rehabilitation Management, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Pennsylvania

(State or country under the law of which it is incorporated)

3. 25-1715024

(FEI number, if applicable)

4. September 21, 1995

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. upon approval

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2741 Noblestown Road, Pittsburgh, Pennsylvania 15205

(Principal office address)

2741 Noblestown Road, Pittsburgh, Pennsylvania 15205

(Current mailing address)

8. provides case management, disability management and cost containment services

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: **CT Corporation System**

Office Address: **1200 South Pine Island Road**

Plantation

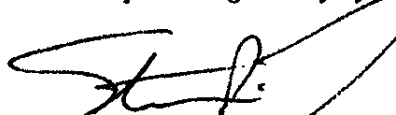
(City)

Florida 33324

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative 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's signature)

**STEVEN P. ZIMMER
SPECIAL ASSISTANT SECRETARY**

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED
09 APR 24 PM 3:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: David J. Miller

Address: 2741 Noblestown Road
Pittsburgh, Pennsylvania 15205

Vice Chairman: Deann J. Kasper

Address: 2741 Noblestown Road
Pittsburgh, Pennsylvania 15205

Director: Susan L. White

Address: 2741 Noblestown Road
Pittsburgh, Pennsylvania 15205

Director: _____

Address: _____

B. OFFICERS

President: David J. Miller

Address: 2741 Noblestown Road
Pittsburgh, Pennsylvania 15205

Vice President: Susan L. White

Address: 2741 Noblestown Road
Pittsburgh, Pennsylvania 15205

Secretary: Deann J. Kasper

Address: 2741 Noblestown Road

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. David J. Miller, President
(Typed or printed name and capacity of person signing application)

FILED
09 APR 24 PM 8:09
COUNTY OF ST. CLAIR
TULSA, FLORIDA

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

APRIL 22, 2009

APPROPRIATELY FILED
ALLAHASSEE, FLORIDA

09 APR 24 PM 3:09

FILED

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

ASSOCIATES IN REHABILITATION MANAGEMENT, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Richard A. Coates

Secretary of the Commonwealth