

NO1000000229

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

900003504349--7
-12/18/00--01117--012
*****87.50 *****87.50

SUBJECT: Specialized Therapeutic & Alternative Rehabilitation Services, Inc
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee &
Certificate of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Brenda PreJean Turpeau
Name (Printed or typed)

2850 N. Federal Highway-4th Floor
Address

Lighthouse Point, FL 33064
City, State & Zip

(954) 785-8285
Daytime Telephone number

FILED
01 JAN 10 PM 2:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

W-30205

1/10/01



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

December 28, 2000

BRENDA PREJEAN TURPEAU
2850 N FEDERAL HWY, 4TH FLOOR
LIGHTHOUSE POINT, FL 33064

SUBJECT: SPECIALIZED THERAPEUTIC & ALTERNATIVE REHABILITATION
THERAPY, INC.
Ref. Number: W00000030205

We have received your document for SPECIALIZED THERAPEUTIC & ALTERNATIVE REHABILITATION THERAPY, INC. 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 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please return the original and one copy of 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 (850) 487-6924.

Kimberly Rolfe
Corporate Specialist Supervisor

Letter Number: 900A00064618

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be:

Specialized Therapeutic & Alternative Rehabilitation Services, Inc.

ARTICLE II PRINCIPAL OFFICE

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

2850 N. Federal Highway-4th Floor
Lighthouse Point, Fl 33064

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is(are):

To provide physical medicine, Holistic and alternative therapy

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:

By means of selection process in compliance with parliamentary procedures as stated in the bylaws.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Brenda Prejean Turpeau
2850 N. Federal Highway-4th Floor
Lighthouse Point, Fl 33064

ARTICLE VI INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:

Brenda Prejean Turpeau
2850 N. Federal Highway-4th Floor
Lighthouse Point, Fl 33064

Brenda Prejean Turpeau
Signature/Incorporator

12-12-00
Date

(An additional article must be added if an effective date is requested.)

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

Brenda Prejean Turpeau
Signature/Registered Agent

12-12-00
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA