

OFFICE ONLY (Docu #)

P00000008514

(Requestor's Name)

(Address)

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

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

1. Avantia Orthopedic Pkha
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input 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

FILED
00 JAN 26 AM 11:32
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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*****78.75 *****78.75

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Examiner's Initials

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation

ARTICLE I NAME

The name of the corporation shall be.

AVENTURA ORTHOPEDIC REHABILITATION INC

ARTICLE II PRINCIPAL OFFICE

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

AVENTURA ORTHOPEDIC REHABILITATION INC.
375 East 49th Street
Hialeah, florida 33013

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have shall be:

100

ARTICLE IV REGISTERED AGENT

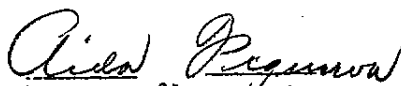
The name and Florida street address of the initial registered agent shall be:

AIDA FIGUEROA
375 East 49th Street
Hialeah, FL 33013

ARTICLE V INCORPORATOR

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

AIDA FIGUEROA
375 East 49th Street
Hialeah, FL 33013


Signature of Incorporator

1/20/00
Date

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ARTICLE VI DIRECTOR(S)/OFFICER(S)

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

AIDA FIGUEROA (P)
375 East 49th Street
Hialeah, FL 33013

Having been named as registered and to accept service of process for the above started 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.


Signature of Registered Agent

1/20/00
Date

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