

PO00000030816

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H00000013375 1)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 922-4001

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 541-3694
Fax Number : (305) 541-3770

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 MAR 27 PM 4:46

FILED

FLORIDA PROFIT CORPORATION OR P.A.

THERAPY @ HAND, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

H00000013375

FILED

ARTICLES OF INCORPORATION
OF
THERAPY @ HAND, INC.

00 MAR 27 PM 4:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I. NAME

The name of the corporation shall be THERAPY @ HAND, INC.

ARTICLE II. PRINCIPAL OFFICE

The initial principal place of business & mailing address is:
9333 N.W. 53rd Court, Sunrise, FL 33351.

ARTICLE III. PURPOSE OF BUSINESS

This corporation may engage in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE IV. SHARES

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock having a par value of \$1.00 per share.

ARTICLE V. OFFICERS/DIRECTORS

This corporation shall have its officers act as Directors. The name and street address of the President is: Cheryl Abruzzo, 9333 N.W. 53rd Court, Sunrise, FL 33351.

ARTICLE VI. REGISTERED AGENT

The name & Florida street address of the registered agent is: Daniel G. Gass, 10001 NW 50th Street, Suite 204, Sunrise, FL 33351.

ARTICLE VII. INCORPORATOR

The name and address of the Incorporator is: Daniel G. Gass, 10001 NW 50th Street, Suite 204, Sunrise, FL 33351.

I hereby accept the appointment as Registered Agent & agree to act in this capacity.

X  3/24/00
Daniel G. Gass, Registered Agent Date

I hereby accept the duties and responsibilities as incorporator of said corporation.

X  3/24/00
Daniel G. Gass, Incorporator Date

Prepared by: Daniel G. Gass, Esquire
10001 NW 50th Street, #204, Sunrise, FL 33351
FL Bar No. 19569 (954) 741-8228 Fax Audit: _____
F:\MPDOCS\FORMS\CORPORAT\ARTICLES\ARTICLE7.NEW

H00000013375