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TRANSMITTAL LETTER

April 11, 2000

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\*\*\*\*\*87.50 \*\*\*\*\*87.50

Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, Florida 32314

SUBJECT: Articles of Incorporation

Enclosed are one original and two copies of the Articles of Incorporation  
And a check for:

\$87.50 for the filing fee, certified copy, and Certificate of Status

FROM:

Bruce A. Huddleston  
15003 Iona Lakes Dr.  
Fort Myers, FL 33908  
(941) - 433 - 1715

FILED  
00 APR 14 PM 12:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4-20  
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## ARTICLES OF INCORPORATION

Pursuant to Chapter 607 or 612F.S., (profit) the articles of incorporation, we set forth the following:

### Article I: Name:

The name of the corporation shall be:  
ALL KIDS THERAPY, INC

### Article II Principle Office:

The principal place of business / mailing address is:  
15003 Iona Lakes Dr.  
Fort Myers, FL 33908

### Article III Purpose:

The purpose for which this corporation is being established:

To provide Occupational Therapy services in the state of Florida.

### Article IV Shares

The number of shares of stock being issued is: 100 shares

### Article V Initial Officers / Directors:

The name(s) and address(es) of the initial officers /directors are (is):

Bruce A. Huddleston, President  
15003 Iona Lakes Dr.  
Fort Myers, FL 33908

Bruce A. Huddleston, Secretary  
15003 Iona Lakes Dr.  
Fort Myers, FL 33908

### Article VI Registered Agent:

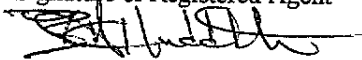
The name and Florida Street address of the registered agent is:  
Bruce A. Huddleston  
15003 Iona Lakes Dr.  
Fort Myers, FL 33908

### Article VII Incorporator

The name and address of the Incorporator is:  
Bruce A. Huddleston  
15003 Iona Lakes Dr.  
Fort Myers, FL 33908

Having been named as registered agent and to accept service 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.

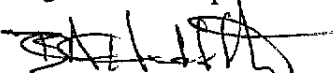
Signature of Registered Agent



Date

4/12/00

Signature of Incorporator



Date

4/12/00

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