

00000000 88781

ATTORNEYS' TITLE

Requestor's Name

660 E. Jefferson St.

Address

Tallahassee, FL 32301

City/St/Zip

850-222-2785

Phone #

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

1- REHAB ZONE, INC.

2-

3-

4-

☒ Walk-in

☐ Pick-up time ASAP

☒ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<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

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-09/20/00--01003--001
*****78.75 *****78.75

T. SMITH SEP 19 2000

Examiner's Initials

RECEIVED
00 SEP 19 PM 8 06
DIVISION OF CORPORATION

FILED
00 SEP 19 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION
OF
REHAB ZONE, INC.**

ARTICLE I. - NAME

The name of the corporation is **REHAB ZONE, INC.** The address of the principal office of this corporation shall be 405 South 11th Street, Lake Wales, Florida 33853, and the mailing address shall be 405 South 11th Street, Lake Wales, Florida 33853.

ARTICLE II. - DURATION

This corporation shall have perpetual existence commencing upon the filing of these Articles of Incorporation by the Department of the State of Florida.

ARTICLE III. - PURPOSE

This corporation is organized for the purpose of transacting any or all lawful business.

ARTICLE IV. - CAPITAL STOCK

This corporation is authorized to issue 7,500 shares of \$1.00 par value common stock which shall be designated "common shares".

ARTICLE V. - PREEMPTIVE RIGHTS

Each shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he, she or it already holds, shall have the right to purchase his, her or its pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price which it is offered to others.

ARTICLE VI. - INITIAL REGISTERED OFFICE AND AGENT

The street and post office address of the initial registered office of this corporation is 303 Security Square, Winter Haven, Florida 33880, and the name of the initial registered agent of this corporation at that address is Edwin M. Soriano.

ARTICLE VII. - INITIAL BOARD OF DIRECTORS

This corporation shall have four (4) directors initially. The number of directors may be either increased or diminished from time to time by the by-laws, but shall never be less than one.

The names and addresses of the initial directors of this corporation are:

Edwin M. Soriano
2525 E. Lake Hartridge
Winter Haven, FL 33881

Amor Ladia
1829 6th Street, S.E.
Winter Haven, FL 33880

James K. Pascual
924 S. Heron Circle
Winter Haven, FL 33880

Ace Sterling Medina
4007 Mahogany Run, S.E.
Winter Haven, FL 33884

ARTICLE VIII. - INCORPORATOR

The name and address of the person signing these Articles of Incorporation are
Edwin M. Soriano, 2525 E. Lake Hartridge, Winter Haven, Florida 33881.

ARTICLE IX. - AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment thereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 18th day of September, 2000.

Signed in the presence of:

Thomas B. Petrucci, Jr.

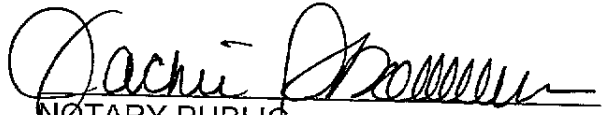
Jacqui P. [Signature]
Two Witnesses

[Signature]
EDWIN M. SORIANO

STATE OF FLORIDA
COUNTY OF POLK

The foregoing instrument was acknowledged before me this 18th day of September, 2000, by **EDWIN M. SORIANO**, who is personally known to me or produced a _____ as identification.

(SEAL)


NOTARY PUBLIC
Jackie S. Hoverkamp
Print or Type Name of Notary

My Commission Expires:



Jackie S. Hoverkamp
MY COMMISSION # CC595024 EXPIRES
November 19, 2000
BONDED THRU TROY FAIR INSURANCE, INC.


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**CERTIFICATE DESIGNATING REGISTERED
AGENT AND OFFICE**

In compliance with Sections 48.091 and 607.0501, Florida Statutes, the following is submitted:

That **REHAB ZONE, INC.**, desiring to organize and qualify as a corporation under the laws of the State of Florida, with its initial registered office at 303 Security Square, Winter Haven, Florida 33880, has named **EDWIN M. SORIANO**, located at 303 Security Square, Winter Haven, Florida 33880, as its Registered Agent to accept service of process within the State of Florida; and

That, having been named to accept service of process for the above-named corporation, at the place designated in this Certificate, **EDWIN M. SORIANO**, hereby agrees to act in this capacity, and further agrees to comply with the provisions of all statutes relative to the proper performance of her duties.




EDWIN M. SORIANO

[Vertical Stamp: NOTARY PUBLIC, SEP 19 AM 9:00, POLK COUNTY, FLORIDA]

STATE OF FLORIDA
COUNTY OF POLK

The foregoing instrument was acknowledged before me this 18th day of September, 2000, by **EDWIN M. SORIANO**, who is personally known to me or produced a Florida driver's license as identification.

(SEAL)



NOTARY PUBLIC
Jackie S. Hoverkamp
Print or Type Name of Notary

My Commission Expires



Jackie S. Hoverkamp
MY COMMISSION # CC595024 EXPIRES
November 19, 2000
BONDED THRU TROY FAIR INSURANCE, INC.