

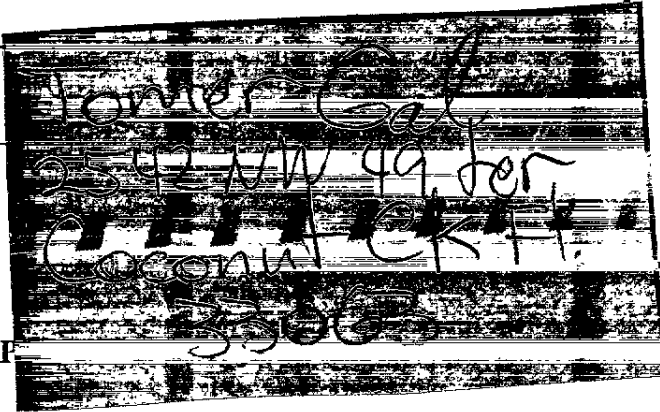
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SECRETARY OF STATE
TALLAHASSEE FLORIDA



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CORP

R(S), (if known):

1. _____ (Corporation Name) _____ (Document #) 500003706955--1
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2. _____ (Corporation Name) _____ (Document #)
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- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Daw 2/19/01

ARTICLES OF INCORPORATION

of

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Rite Therapy, Inc.

(name of corporation)

SECRETARY OF STATE
TALLAHASSEE FLORIDA

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

Rite Therapy, Inc.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 100 shares () of one Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares".

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME	<u>Tomer Gal</u>		
ADDRESS	<u>2542 NW 49th Terrace</u>		
CITY	<u>Coconut Creek</u>	FLORIDA	ZIP <u>33063</u>

The principal office, if known, or the mailing address of the corporation is:

NAME	<u>Tomer Gal</u>		
ADDRESS	<u>2542 NW 49th Terrace</u>		
CITY	<u>Coconut Creek</u>	FLORIDA	ZIP <u>33063</u>

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) 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 (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	<u>Tomer Gal</u>		
ADDRESS	<u>2542 NW 49th Terrace</u>		
CITY	<u>Coconut Creek</u>	STATE	<u>Florida</u>
			ZIP <u>33063</u>
NAME			
ADDRESS			
CITY		STATE	
			ZIP
NAME			
ADDRESS			
CITY		STATE	
			ZIP

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	<u>Tomer Gal</u>		
ADDRESS	<u>2542 NW 49th Terrace</u>		
CITY	<u>Coconut Creek</u>	STATE	<u>Florida</u>
			ZIP <u>33063</u>
NAME			
ADDRESS			
CITY		STATE	
			ZIP
NAME			
ADDRESS			
CITY		STATE	
			ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 8 day of Feb 19 2001.

Tomer Gal (Seal)
 _____ (Seal)
 _____ (Seal)

CERTIFICATE AND KNOWLEDGEMENT
OF REGISTERED AGENT

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CERTIFICATE OF REGISTERED AGENT
OF

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Rite Therapy, Inc.
(name of corporation)

suant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
e above corporation, desiring to organize under the laws of the State of Florida with
registered office as indicated in the Articles of Incorporation

2542 NW 49th Terrace, Coconut Creek, Florida
33063

named Tomer Gal
ited at the aforesaid address, as its Registered Agent to accept service of process within
state.

ACKNOWLEDGEMENT

ing been named as Registered Agent to accept service of process for the above stated
oration at the place designated in this certificate, and being familiar with the obliga-
s of that position, I hereby accept to act in this capacity, and agree to comply with the
isions of Florida Law in keeping open said office.

Tomer Gal
(registered agent)