

LAZARUS CORPORATE FILING SERVICE

(Requestor's Name)

3320 S.W. 87 AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

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

1. FORTE THERAPY INC.

(Corporation Name)

(Document #)

2. (Corporation Name)

(Document #)

3. (Corporation Name)

(Document #)

4. (Corporation Name)

(Document #)

☒ Walk in

☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

☒ Profit

☐ NonProfit

☐ 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

☐ Name Reservation

REGISTRATION/ QUALIFICATION

☐ Foreign

☐ Limited Partnership

☐ Reinstatement

☐ Trademark

☐ Other

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-05/03/01--01038--018

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

Examiner's Initials

ARTICLES OF INCORPORATION

The undersigned incorporator(s), 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 : **FORTE THERAPY INC.**

ARTICLE II PRINCIPAL OFFICE

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

8341 N.W 166 TERRACE MIAMI LAKES, FL 33016

ARTICLE III SHARES

The number of shares of stock this corporation is authorized to have outstanding at any time is :

Ten shares @ \$100.00 par value

ARTICLE IV INITIAL REGISTERED AGENT


The name and Florida address of the initial registered agent is :

GEMA FORTE 8341 N.W 166 TERRACE MIAMI LAKES, FL 33016

ARTICLE V INCORPORATOR(S)

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

GEMA FORTE (PRESIDENT) 8341 N.W 166 TERRACE MIAMI LAKES, FL 33016


Signature / Incorporator

2-9-01
Date

Having been named as registered agent and to accept service of process 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 / Registered Agent

2-9-01
Date

FILED
01 MAY -3 PM 1:37
SECRETARY OF STATE
TALLAHASSEE FLORIDA