

P010000 96403

TRANSMITTAL LETTER – ARTICLES OF INCORPORATION

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
01 OCT - 1 PM 1:08

SUBJECT: Advanced Pain Management & Rehabilitation Center, Inc.
(Proposed corporate name – must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☒ 78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Bonnie Hendricks
Name (Printed or typed)

c/o SWART BAUMRUK & COMPANY, LLP
717 East Oak Street
Address

Kissimmee, FL 34744
City, State & Zip

(407) 847-7466
Daytime Telephone Number

100004619171-2
-10/01/01-01103-004
*****78.75 *****78.75

FILED OCT 3 2001

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
ADVANCED PAIN MANAGEMENT &
REHABILITATION CENTER, INC.

FILED STATE
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
01 OCT - 1 PM 1:08

ARTICLE I. NAME

The name of this corporation shall be Advanced Pain Management & Rehabilitation Center, Inc.

ARTICLE II. DURATION

This corporation shall have perpetual existence commencing on October 1, 2001.

ARTICLE III. PURPOSE

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

ARTICLE IV. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000 shares of common stock having a par value of \$1.00 per share.

ARTICLE V. ADDRESS

The initial post office address of the principal place of business of this corporation is 716 East Colonial Drive, Orlando, FL 32803. The Board of Directors may, from time to time, move the principal office to any other address in Florida.

ARTICLE VI. DIRECTORS

This corporation shall have two directors initially. The number of directors may be changed from time to time by the bylaws. The names and addresses of the initial directors, who will serve until the first annual meeting of shareholders of the corporation or until their successors are duly elected and qualified are:

| NAME | ADDRESS |
|--------------------|---|
| Emmanuel G. Acosta | 4433 Lake Calabay Drive Orlando, FL 32837-5468 |
| Leticia Antonio | 4433 Lake Calabay Drive Orlando, FL 32837-5468 |

ARTICLE VII. SUBSCRIBERS

The subscriber to these Articles of Incorporation is:

NAME

ADDRESS

Andy J. Baumruk, CPA

717 E. Oak Street
Kissimmee, FL 34744

ARTICLE VIII. OFFICERS

The officers of this corporation shall be President, Vice President, Secretary, and Treasurer. They shall be elected by the Board of Directors.

ARTICLE IX. REGISTERED AGENT

The initial registered agent and registered agent's address for service of process for this corporation is:

NAME

ADDRESS


Andy J. Baumruk, CPA

717 E. Oak Street
Kissimmee, FL 34744

ARTICLE X. AMENDMENTS

These Articles of Incorporation may be amended in the manner set forth in the bylaws of this corporation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 28th day of September 2001.



Andy J. Baumruk, CPA


STATE OF FLORIDA
COUNTY OF OSCEOLA

BEFORE ME, a Notary Public authorized to take acknowledgments in the state and county set forth above personally appeared Andy J. Baumruk, known to me personally and executed the foregoing Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the state and county aforesaid this 28th day of September 2001.



Bonnie J. Hendricks
MY COMMISSION # CC925619 EXPIRES
April 8, 2004
BONDED THRU TROY FAIN INSURANCE, INC.




Bonnie J. Hendricks
Notary Public, State of Florida

DESIGNATION AND ACCEPTANCE OF REGISTERED AGENT

The undersigned subscriber of Advanced Pain Management & Rehabilitation Center, Inc., designates the following individual as registered agent for this corporation:

Andy J. Baumruk, CPA
717 E. Oak Street
Kissimmee, FL 34744




Andy J. Baumruk, CPA

ACCEPTANCE OF REGISTERED AGENT

The undersigned does hereby accept the designation as registered agent of Advanced Pain Management & Rehabilitation Center, Inc.

DATED this 28th day of September 2001.



Andy J. Baumruk, CPA

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