

P01000114567
TRANSMITTAL LETTER

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

700004701037--9
-11/30/01-01079-015
*****87.50 *****87.50

SUBJECT: Greater health rehabilitation, inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Moise Etienne
Name (Printed or typed)

17720 NW 67 AV Apt 421
Address

Miami, Lakes, FL 33015
City, State & Zip

(305) 336-8158
Daytime Telephone number

FILED
01 NOV 30 PM 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

P32/4/01-

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Greater Health Rehabilitation, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

17720 NW 67 Av Apt 421
miami Lakes, FL 33015

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

(Please refer to the attach document)
Labeled 1 of 1

ARTICLE IV SHARES

The number of shares of stock is:

TEN

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Moise Etienne Apt 421
17720 NW 67 Av
miami Lakes, FL 33015

I will be the:
president, vice president, treasurer
secretary & will be the sole director.

ARTICLE VI REGISTERED AGENT

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

Moise Etienne Apt 421
17720 NW 67 Av
miami Lakes, FL 33015

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Moise Etienne Apt 421
17720 NW 67 Av
miami Lakes, FL 33015

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

11/27/01

Date



Signature/Incorporator

11/27/01

Date

Article III purpose: 1 of 1

The purpose of this corporation is to provide Physical, Occupational and Speech Therapy Services within the scope of practice to rehabilitate, habilitate, prevent and educate individuals and/or persons of all ages from or on physical disabilities and/or injury, emotional, psychological disabilities and/or illness and socioeconomic distress, that would or could impair the individual/person from performing any activity of daily living such as; working, Learning, Leisure and/or play activities, caring for ones self and/or others, getting around in the home or community, communicating verbally, walking and/or talking effectively and any other task that is part of the individuals daily life or routine independently.

The foregoing purposes and activities will be interpreted as examples only and not as limitations, and nothing therein shall be deemed as prohibiting the corporation from engaging in any lawful act or activity for which a corporation may be organized under the General Corporation Law of the state of Florida.



Moise Etienne