

TRANSMITTAL LETTER

P02000002477

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

500004755255--4
-01/07/02--01044--005
*****78.75 *****78.75

SUBJECT: W & K REHABILITATION SERVICES, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: WILFREDO E. CANALES
 Name (Printed or typed)

1800 W. 49 STREET, SUITE #324-G
 Address

HALEAH, FL. 33012
 City, State & Zip

(305) 333-0879
 Daytime Telephone number

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 JAN -7 AM 8:44

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

W & K REHABILITATION SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1800 W. 49 STREET
SUITE #324-G
HIALEAH, FL. 33012

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PHYSICAL THERAPY
OCCUPATIONAL THERAPY. *cf.*

ARTICLE IV SHARES

The number of shares of stock is:

2000 @ \$1.00 per share

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Mr. Wilfredo E. Canales - President
Miss Karen Balkanski - Vice President

ARTICLE VI REGISTERED AGENT

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

Charles Inije
18101 N.W. 68 Ave #B-206
Miami Lakes, Fl. 33015

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Wilfredo E. Canales
1800 W. 49 Street
Suite # 324-G
Hialeah, Fl. 33012

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

Charles Inije

Signature/Registered Agent

1/02/02

Date

Wilfredo Canales

Signature/Incorporator

01/03/02

Date

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 JAN -7 AM 8:46