# 02000038442 TRANSMITTAL LETTER

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

800005190738--6 -04/04/02--01011--008

SUBJECT: \_\_JEG THERAPY CORP.

(Proposed corporate name-must include suffix)

Enclosed are an original and three (3) copies of the articles of incorporation and a check for:

\$ 70.00

\$78.75

\_\_\_\$ 78.75

X \$87.50

Filing Fee

Filing Fee

Filing Fee

Filing Fee

& Certificate

& Certified Copy

Certified Copy

& Certificate

FROM:

Julio E. Gonzalez

Address: 1277 SW 131 Pl. Cir. West

Miami, Fl 33165

Daytime

Cell. Phone: (305) 720-5289

#### ARTICLES OF INCORPORATION

In compliance with chapter 607 and/or chapter 621, F.S. (Profit), the undersigned, hereby associate for the purpose of becoming a corporation under the laws of the State of Florida, providing for the formation, liability, rights, privileges, and immunities of corporations for profit.

#### ARTICLE I, NAME

The name of this corporation shall be:

#### JEG THERAPY CORP.

### ARTICLE II PRINCIPAL OFFICE

The initial principal place of business/ mailing address is:

1277 SW 131 Pl. Cir. West Miami, FL 33184

#### ARTICLE III PURPOSE

This corporation may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

That the present main business of the corporation is as follows:

Ocupational Therapy Services.

#### ARTICLE IV SHARES

The number of shares of stocks is:

One Hundred (100.00) shares of common stock, of One Dollar (\$1.00) per value.



#### ARTICLE V INITIAL OFFICERS/ DIRECTORS

This corporation shall have one (1) director initially. The number of directors may be increased or decreased from time to time in such manner as may be prescribed by the by-laws, but shall never be less than one (1).

The names and addresses of the first board of Directors and of the Officers are as follows:

Title

Name

Address

President

Julio E. Gonzalez

1277 SW 131 Pl. Cir. West

Miami, FL 33184

#### ARTICLE VI - REGISTERED AGENT

The name and the Florida State address of the registered agent is

Julio E. Gonzalez 1277 SW 131 Pl. Cir. West Miami, FL 33184

#### ARTICLE VII INCORPORATOR (S)

The name and address of the incorporator (s) is (are)

Name

Address

Julio E. Gonzalez

1277 SW 131 Pl. Cir. West.

Miami, FL 33184

#### ARTICLE VIII - TERM OF EXISTENCE

This corporations is to have perpetual existence.

#### ARTICLE IX - AMENDMENT

This Corporation reserves the right to amend, alter, change or repeal any provision contained in these Articles of Incorporation in the manner now or hereafter prescribed by Statute, and all rights conferred on stockholders herein granted subject to this reservation.

IN WITNESS WHEREOF, the undersigned, as subscribing incorporates, have hereunto set our hands and seals this 1st day of April, 2002 for the purpose of forming this Corporation under the laws of the State of Florida, and hereby make and file, in the office of the Secretary of the State of Florida, these Articles of Incorporation, and certify that the facts herein stated are true.

Julio E. Gonzalez

President

This document prepared by Lilia C. Dube (305) 485-4454 10461 SW 40 Terrace Miami, FL 33165

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

FILED 02 APR -3 PM 1:48

SECRETARY OF STATE TALLAHASSEE FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1- The name of the Corporation is: JEG THERAPY CORP.
- 2- The name and address of the registered agent and office is:

Julio E. Gonzalez 1277 SW 131 Pl. Cir. West Miami, FL 33184

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

Julio E. Gonzalez (Signature)

(Date).

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314