TRANSMITTAL LETTER

P02000095768

FILED
02 SEP -5 AM 10:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

300007338883--4
-08/26/02--01051--014
*****87.50 *****87.50

SUBJECT: FREE MOTION PHYSICAL THERAPY OF BREVARD P.A. 22-3863516 EIN
(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: ROBERT J. RAZZINO
Name (Printed or typed)

901 FOSTORIA DRIVE
Address

MELBOURNE, FL 32940
City, State & Zip

321-757-6772
Daytime Telephone number

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

W02-24751

02

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State

August 26, 2002

ROBERT J. RAZZINO
901 FOSTORIA DR
MELBOURNE, FL 32940

SUBJECT: FREE MOTION PHYSICAL THERAPY OF BREVARD P.A.
Ref. Number: W02000024751

We have received your document for FREE MOTION PHYSICAL THERAPY OF BREVARD P.A. and your check(s) totaling $87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

The registered agent must sign accepting the designation.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6930.

Donna Graves
Document Specialist
New Filing Section

Letter Number: 802A00049871

FILED

02 SEP -5 AM 10:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

FREE MOTION PHYSICAL THERAPY OF BREVARD P.A.

EIN 22-3863516

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

MAILING ADDRESS	BUSINESS ADDRESS
901 FOSTORIA DRIVE	1300 BEDFORD DRIVE UNIT 3
MELBOURNE, FL 32940	MELBOURNE, FL 32940

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROVIDE
PHYSICAL THERAPY & EXERCISE CLINIC REHAB

ARTICLE IV SHARES

The number of shares of stock is:

1000 shares

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

ROBERT J. RAZZINO 901 FOSTORIA DRIVE MELBOURNE, FL 32940 President/Director
NANCY I. RAZZINO 901 FOSTORIA DRIVE MELBOURNE, FL 32940 Secretary/Director
ANTHONY R. RAZZINO 1056 WIMBLEDON DRIVE MELBOURNE, FL 32940 Director
STACIE J. RAZZINO 1056 WIMBLEDON DRIVE MELBOURNE, FL 32940 Director

ARTICLE VI REGISTERED AGENT

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

ROBERT J. RAZZINO
901 FOSTORIA DRIVE
MELBOURNE, FL 32940

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

ROBERT J. RAZZINO
901 FOSTORIA DRIVE
MELBOURNE, FL 32940

****

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

Robert J. Razzino
Signature/Registered Agent

9/4/02
Date

Robert J. Razzino
Signature/Incorporator

8/21/02
Date