DOZ DODO 102799

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

| SUBJECT: | ONL', 9 J. / | icker, P.A. | **** 10 . 10 - ******** (0 . 1 / : | (b) | · |
|-------------------------|---|---|--|-----------|--|
| Enclosed is an origin | | | UDE SUFFIX) | <u> </u> | |
| □ \$70.00 Filing Fee | al and one(1) copy of the articl \$78.75 Filing Fee & Certificate of Status | s of incorporation and a \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status | o ∵. Tike | |
| FROM: | Name (Printed or typed) CRAIG J. TUCKER 609 6 TH STREET LAKE PARK, FLORIDA 33403 City, State | | | | The state of the s |
| | | | 110 25 | ,019 | |

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



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

August 28, 2002

CRAIG J. TUCKER 609 6TH STREET LAKE PARK, FL 33403

SUBJECT: CRAIG J. TUCKER, P.A.

Ref. Number: W02000025019

We have received your document for CRAIG J. TUCKER, P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The specific nature of business of the professional association must be stated in the document.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6972.

Doris Brown Document Specialist New Filings Section

Letter Number: 902A00050211

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:

CRAIG J. TUCKER , P.A.



ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

609 6TH STREET

LAKE PARK, FLORIDA 33403

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PHYSICAL THERAPY AND RELATED ITEMS

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

CRAIG J. TUCKER - PRESIDENT

609 GTH STREET

LAKE PARK, FLORIDA 33403

ARTICLE VI REGISTERED AGENT

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

CRAIG J TUCKER

609 6TH STREET

LAKE PARK, FLORIDA 33403

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CRAIG J. TUCKER

609 GTH STREET

LAKE PARK, FLORIDA 33403

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

/Signature/Registered Agent

Signature/Incorporator

9/18/0 (Date

9/18/02