

PO3000056582

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

05/14/09--01058--012 **87.50

(Document Number)

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TRANSMITTAL LETTER

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

SUBJECT: North Florida Physical Therapy 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: Charles M. Evans

Name (Printed or typed)

1284 Norwich Rd.

Address

Jacksonville, FL 32207

City, State & Zip

904-739-2182

Daytime Telephone number

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

FILED

03 MAY 14 PM 2:35

STATE OF FLORIDA
DEPARTMENT OF STATE
REGISTRATION DIVISION

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:

North Florida Physical Therapy Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1284 Norwich Rd.
Jacksonville, FL 32207

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide physical therapy services.

ARTICLE IV SHARES

The number of shares of stock is:

10,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Charles M. Evans - President
1284 Norwich Rd.
Jacksonville FL, 32207

Kristie L. Evans - Secretary
1284 Norwich Rd.
Jacksonville, FL 32207

ARTICLE VI REGISTERED AGENT

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

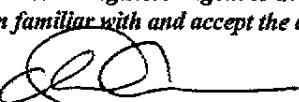
Charles M. Evans
1284 Norwich Rd.
Jacksonville, FL 32207

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Charles M. Evans
1284 Norwich Rd.
Jacksonville, FL 32207

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

5-11-03

Date



Signature/Incorporator

5-11-03

Date