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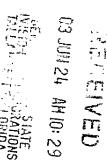
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EXPRESS CORPORATE FILING SERVICE INC. Requestor's Name 1000 PONCE DE LEON BLVD. SUITE:101 Address CORAL GABLES, FL 33134 City/State/Zip Phone # CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

. NEW THE	ERAPY	CENTER	INC.	
•	tion Name)		(Document #)	
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☐ Walk in ☐	Pick up time		Certified Copy	
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NEW FILINGS		AMENDMEN	S E E CENTRAL CONTROL	
Profit		Amendment		
NonProfit		Resignation of R.A., Officer/ Director		
Limited Liability		Change of Registered Agent		
Domestication		Dissolution/Withdrawal		
Other		Merger		
OTHER FILM	S	REGISTRATION		
Annual Report		QUALIFICATION	···	
Fictitious Name		Foreign		
Name Reservation	,	Limited Partnership		
		Reinstatement		
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Other

OFFICE USE ONLY

Examiner's Initials

ARTICLES OF INCORPORATION

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

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ARTICLE I NAME

The name of the corporation shall be:

New Therapy Center, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 631 NW 45 Ave
Miami, FL, 33126

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Any and all legal business permited in the State of Florida

ARTICLE IV SHARES

The number of shares of stock is: 500 Shares at \$1.00 per share

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s): Jorge G. Davis President 9300 SW 43 St. Miami, FL. 33165

ARTICLE VI REGISTERED AGENT

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

Jorge G. Davis President 9300 SW 43 St. Miami, FL. 33165

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jorge G. Davis President 9300 SW 43 St. Miami, FL. 33165

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

Circotura Paristand Agent

Signature/Registered Agent

Signature/Incorporator

0 20 03 Date

6 /20 /03 Date