Division of Corporations

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# 000872

# Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

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From:

: EMPIRE CORPORATE KIT COMPANY Account Name

Account Number : 072450003255 : (305)634-3694 Phone Fax Number : (305)633-9696

# FLORIDA PROFIT CORPORATION OR P.A.

adny rehab inc.

Certificate of Status	8
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Estimated Charge	\$78.75

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#### THE USBUULVUITE

# Articles of Incorporation

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

ADNY REHAB INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3383 NW 7 Street #100 Miami, FL 33125

# ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: The number shares which this corporation shall have the authority to issue is 100 shares of common stock NO PAR VALUE. Each share shall have equal rights to each other share with respect to dividends voting and in liquidation.

## ARTICLE IV INITIAL REGISTERED AGENT & STREET ADDRESS

The name and Florida street address of the initial registered agent are:

FERNANDO LUIS SOUTULLO

15419 SW 54 Street, Miami, FL 33185

#### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

FERNANDO LUIS SOUTULLO

15419 SW 54 /street, Miami, FL 33185

## ARTICLE VI OFFICERS AND DIRECTORS

FERNANDO LUIS SOUTULLO - Pres, 15419 SW 54 St., Miami, FL 33185

ANDRES ARIEL LUPAINO - VP, 17962 SW 29 Lane, Miami, FL 33029

Signature/Incorporator

Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certicate, I hereby accept the appoint ment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statues 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.

Signature/Registered Agents

8/4/03

Date

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