

P030000087829

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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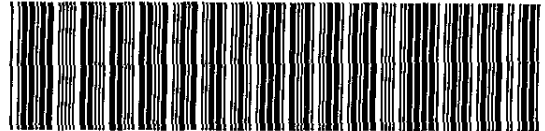
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08/11/03--01015--009 \*\*78.75

EFFECTIVE DATE  
08-08-03

FILED  
03 AUG 11 PM 4:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

g8/11

## TRANSMITTAL LETTER

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

SUBJECT: E-S.B. PHYSICAL THERAPY, INC.  
(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: P + P ACCOUNTING  
Name (Printed or typed)

1501 SW 16 AVE  
Address

MIAMI FL 33145  
City, State & Zip

305-448-0611  
Daytime Telephone number

**EFFECTIVE DATE**  
08-08-03

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

**ARTICLES OF INCORPORATION OF  
E.S.B. PHYSICAL THERAPY, INC.**

FILED  
03 AUG 11 PM 4:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I**

NAME: The name of this corporation is: E.S.B. PHYSICAL THERAPY, INC.

ADDRESS: The address of this corporation is:  
8751 N.W. 107 LANE HIALEAH GARDENS, FL 33018

**ARTICLE II**

COMMENCEMENT OF EXISTENCE: This corporation shall commence to exist on the date of the subscription of these Articles if filed within five (5) days with the Secretary of State.

**ARTICLE III**

PURPOSE: This corporation is organized for the purpose of transacting any and all lawful business permitted under the laws of the United States and the State of Florida.

**ARTICLE IV**

CAPITAL STOCK: This corporation is authorized to issue 300 shares of \$1.00 par value common stock, which shall be the only class of shares.

**ARTICLE V**

PRE-EMPTIVE RIGHTS: Every shareholder upon the sale for cash of any new stock of this corporation of the same kind, or class of service as that which he /she already holds, shall have the right to purchase his/her pro rate share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

**EFFECTIVE DATE**  
08-08-07

**ARTICLE VI**

INITIAL REGISTERED OFFICE AND AGENT: The street address of the initial registered office of this corporation is: 8751 N.W. 107 LANE HIALEAH GARDENS, FL 33018

The name of the initial registered agent of the corporation at that address is:  
EZEQUIEL SOCORRO

**ARTICLE VII**

INITIAL BOARD OF DIRECTORS: This corporation shall have 1 director(s) initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one. The name(s) and address(es) of the initial director(s) is/are:

NAME	ADDRESS	POSITION	PERCENT OF OWNERSHIP
EZEQUIEL SOCORRO	8751 N.W. 107 LANE HIALEAH GARDENS, FL 33018	P/VP/S/T	100.00

**ARTICLE VIII**

INCORPORATION: The name and address of the person signing these Articles of Incorporation is:  
EZEQUIEL SOCORRO  
8751 N.W. 107 LANE HIALEAH GARDENS, FL 33018

**ARTICLE IX**

INDEMNIFICATION: The corporation shall indemnify any officer or director, or any former officer or director to the full extent permitted by law.

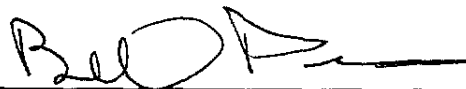
IN WITNESS HEREOF, the undersigned subscribed has executed these Articles of Incorporation this:  
8/8/2003



STATE OF FLORIDA  
COUNTY OF MIAMI-DADE

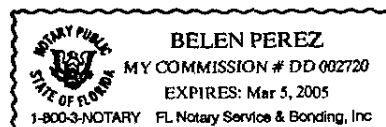
BEFORE ME, the undersigned authority, personally appeared: EZEQUIEL SOCORRO  
to me known to be the person described as Subscriber in and who executed the foregoing Articles of  
Incorporation.

WITNESS my hand and official seal in the County and State aforesaid this 8/8/2003



NOTARY PUBLIC  
State of Florida at large

*My commission expires:*



CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS  
WITHIN THIS STATE, NAMING AGENT ON WHOM PROCESS MAY BE MADE:

- Pursuant to section 607.0501, Florida Statutes, the following is submitted in compliance with said Act:

First, that: E.S.B. PHYSICAL THERAPY, INC. desiring to organize under the laws of the State of Florida, with its principal office, as indicated in the Articles of Incorporation in Miami Dade County, Florida, has named: EZEQUIEL SOCORRO, as its agent to accept service of process within this State.

Having been named to accept service of process for the above stated corporation, at the place designated in this Certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to keeping open said office.

  
\_\_\_\_\_  
Registered Agent

FILED  
03 AUG 11 PM 4:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA