

P03000089772

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

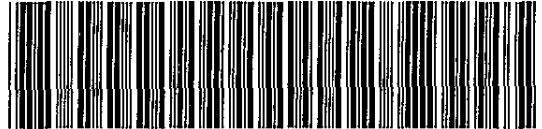
(Business Entity Name)

(Document Number)

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03 AUG 14 12:30 PM  
FALCONER, NY

5-15

**TRANSMITTAL LETTER**

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

**SUBJECT:** LANA L. TURNER 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: LANA L. TURNER  
Name (Printed or typed)

126 DEANNA DRIVE  
Address

LAKE PLACID, FLORIDA 33852  
City, State & Zip

(863) 699-6055  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03 AUG 14 AM 10:50

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**ARTICLE I NAME**

The name of the corporation shall be:

LANA L. TURNER PHYSICAL THERAPY, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

156 E, INTERLAKE BLVD., LAKE PLACID, FLORIDA 33852

mailling address

126 DEANNA DRIVE, LAKE PLACID, FLORIDA 33852

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide physical therapy services.

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

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

LANA L. TURNER, 126 DEANNA DRIVE, LAKE PLACID, FLORIDA 33852:owner/therapist

**ARTICLE VI REGISTERED AGENT**

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

LANA L. TURNER, 126 DEANNA DRIVE, LAKE PLACID, FLORIDA 33852

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

LANA L. TURNER, 126 DEANNA DRIVE, LAKE PLACID, FL 33852

\*\*\*\*\*

*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*

Lana L Turner  
Signature/Registered Agent

LANA L. TURNER

8/04/03  
Date

Lana L Turner  
Signature/Incorporator

LANA L. TURNER

8/04/03  
Date