# P04000027738

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HAMI, FLORIDA (305)552-5973		
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Name Reservation	Limited Partnership	
	Reinstatement	
	Trademark	
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Examiner's Initials

CR2E031(9/92)

#### ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### **ARTICLE I - NAME**

The name of the corporation shall be:

M&D Rehabilitation Services, Inc

## **ARTICLE II - PRINCIPAL OFFICE**

The principal place of business and mailing of this corporation keeps:

3170 5. W. 24 tr.

Migmi, Fronda. 3314v.

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TALLAHASSIE, FLORIDA

#### ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100-

# ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Mick A. Escudero
3170 JW Zf fr
Miami, Fa, 3314v.

### ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles	of	
Incorporation is: A. Facudero		
Incorporation is:  3170 5w 24 fv.  The undersigned incorporator has executed these Articles of		•
( ) 70 EW 2/1.		
The undersigned incorporator has executed these Articles of		
Incorporation this 10 day of Aebreio 20 04		٠
<u> </u>		<i>;</i>
Signature		
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ARTICLE VI- DIRECTOR(S)	FEB	T
ASS.		
The name(s) and street address(es) of the director(s) to the $\sec \frac{\pi}{2}$	7	
Articles of Incorporation is (are):	7	O
Mick M. Escurero Cr)	F	
The name(s) and street address(es) of the director(s) to these address (es) address (es) of the director(s) to these address (es) a		
( 3/70 ) 20.		
Miami, Fey 33145.		
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## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature