

TRANSMITTAL LETTER

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

SUBJECT: Innovative Therapy, P.A.
(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: Heidi Bernard
Name (Printed or typed)

957 Briar Ridge Road
Address

Weston, Florida 33327
City, State & Zip

(954) 888-9518
Daytime Telephone number

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

ARTICLES OF INCORPORATION
OF
INNOVATIVE THERAPY, P.A.

The undersigned does hereby act as incorporator in adopting the following Articles of Incorporation for the purpose of organizing a business corporation pursuant to the provisions of the Florida Business Corporation Act.

FIRST: The name of the corporation (hereinafter called the "Corporation") is Innovative Therapy, P.A.

SECOND: The principal office of the Corporation shall be located at 957 Briar Ridge Road, Weston, Florida 33327. The mailing address of the Corporation is 957 Briar Ridge Road, Weston, Florida 33327.

THIRD: The aggregate number of shares which the Corporation shall have authority to issue is 1,000, all of which are of a par value of \$0.01 each and are of the same class and are to be common shares.

FOURTH: The number of directors constituting the initial Board of Directors of the Corporation is one which may be increased by the bylaws.

The names and addresses of the parties who are to serve as members of the initial Board of Directors of the Corporation are as follows:

NAME

ADDRESS

Heidi Bernard

957 Briar Ridge Road
Weston, Florida 33327

FIFTH: The address of the initial registered agent of the Corporation in the State of Florida is 957 Briar Ridge Road, Weston, Florida 33327, and the name of the initial registered agent of the Corporation at such address is Heidi Bernard.

SIXTH: The name and address of the incorporators are:

NAME

ADDRESS

Heidi Bernard

957 Briar Ridge Road
Weston, Florida 33327

SEVENTH: The purpose of the Corporation is to evaluate and treat a variety of communicative, speech, language, swallowing, and feeding disorders by licensed, professional speech-language pathologists.

EIGHTH: The corporate existence of the Corporation shall commence as of the

FILED
MAR 15 PM 2:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
EFFECTIVE DATE
3/6/2004

date and time upon which these Articles of Incorporation shall have been signed by the incorporators.

Heidi Bernard

Heidi Bernard

Signed on March 10, 2004

Acceptance of Appointment by Registered Agent

Pursuant to the provisions of the Florida Business Corporation Act, the undersigned does hereby accept his appointment as registered agent on which process may be served within the State of Florida for the proposed domestic corporation named in the foregoing Articles of Incorporation.

Heidi Bernard

Heidi Bernard