

P04000154769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

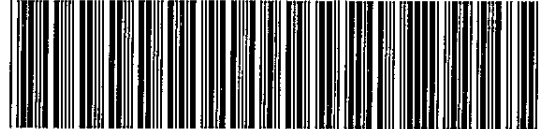
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600042624776

11/12/04--01076--012 **78.75

RECEIVED
04 NOV 12 PM 2:10
STATE DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA

FILED
04 NOV 12 AM 10:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11-15

OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. T E R REHAB INC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- Walk in
 Pick up time 2.00
 Certified Copy
 Mail out
 Will wait
 Photocopy
 Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

04 NOV 12 AM 10:39
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED

Examiner's Initials	
---------------------	--

ARTICLES OF INCORPORATION

T & R REHAB INC

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:

T & R REHAB INC

ARTICLE II - PRINCIPAL OFFICE

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

932 West 79 PL
Hialeah Fl 33014

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 NOV 12 AM 10:39

FILED

ARTICLE III - SHARES

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

SIX HOUNDRED (600) SHARES OF \$1,00 PAR VALUE COMMON STOCK, WHICH SHALL BE DESIGNATED "COMMON STOCK"

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

RUTH REVERON
932 West 79 Pl
Hialeah Fl 33014

