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## **COVER LETTER**

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

7

SUBJECT:^	Minds in Motion	1 Therapy,	inc.
	(PROPOSED CORPORA'	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	i a check for:
S70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PY REQUIRED
FROM:	Summer Jer Name 830 23rd Av		
	St. Petersburg		
	727 - 823 - 44 Daytime To	-109	

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)	
ARTICLE I NAME	FILE
The name of the corporation shall be:  Minds in Motion Therapy, Inc.	2005 NOV 10 F
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	TALLAHASSEE
1600 23rd Ave_N St. Petersburg, FC 33713 ARTICLE III PURPOSE	
The purpose is to provide professional Occup Therapy and Speech Therapy services.  ARTICLE IV SHARES The number of shares of stock is:  5,000	pational
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):  Summer Jensen - Director  830 23rd Ave N.  St. Petersburg, FC 33704	
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent  Summer Jensen 1600 23rd Ave N  St. Petersburg, FL 33713	is:
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Summer Jensen  830 23rd Ave N  St. Petersburg, FL 33704	******
Having been named as registered agent to accept service of process for the above stated corporation at the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capac	he place designated in this
D.B. William of A. B. B. William of A. B.	OS Date